



New Hanover
Health Advantage

FirstCarolinaCare

2025 Formulary

(List of Covered Drugs or “Drug List”)

PLEASE READ: THIS DOCUMENT CONTAINS INFORMATION ABOUT THE DRUGS WE COVER IN THIS PLAN.

This formulary was updated on 10/1/24, Version 10. For more recent information or other questions, please contact FirstCarolinaCare Member Services at (855) 291-9336 (TTY users should call 711), 8 a.m. to 8 p.m., local time, 7 days a week. From April 1 – September 30 voicemail will be used on weekends and holidays, or visit [FirstCarolinaCare.com/NHHA](https://www.FirstCarolinaCare.com/NHHA).

Note to existing members: This Formulary has changed since last year. Please review this document to make sure that it still contains the drugs you take. When this document says “we,” “us,” or “our,” it means FirstCarolinaCare Insurance Company. When it says “plan” or “our plan,” it means New Hanover Health Advantage. This document includes a Drug List (Formulary) for our plan which is current as of 10/1/24, Version 10. For an updated Drug List (formulary), please contact us. Our contact information, along with the date we last updated the Drug List (formulary), appears on the front and back cover pages.

You must generally use network pharmacies to use your prescription drug benefit. Benefits, formulary, pharmacy network and/or copayments/coinsurance may change on January 1, 2025, and from time to time during the year.

ATTENTION: If you speak Spanish, language assistance services, free of charge, are available to you. Call (855) 291-9336 (TTY: 711).

ATENCIÓN: Si habla Español, servicios de asistencia lingüística, de forma gratuita, están disponibles para usted. Llame (855) 291-9336 (TTY: 711).

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New Hanover FirstCarolinaCare HMO-POS Formulary 00025411 Version 10

What is the FirstCarolinaCare formulary?

In this document, we use the terms Drug List and formulary to mean the same thing. A formulary is a list of covered drugs selected by FirstCarolinaCare in consultation with a team of health care providers, which represents the prescription therapies believed to be a necessary part of a quality treatment program. FirstCarolinaCare will generally cover the drugs listed in our formulary as long as the drug is medically necessary, the prescription is filled at a FirstCarolinaCare network pharmacy, and other plan rules are followed. For more information on how to fill your prescriptions, please review your Evidence of Coverage.

Can the formulary change?

Most changes in drug coverage happen on January 1, but we may add or remove drugs on the formulary during the year, move them to different cost-sharing tiers, or add new restrictions. We must follow Medicare rules in making these changes. Updates to the formulary are posted monthly to our website here: www.firstcarolinacare.com/medicare/pharmacy

Changes that can affect you this year:

In the below cases, you will be affected by coverage changes during the year:

- **Drugs removed from the market.** If a drug is withdrawn from sale by the manufacturer or the Food and Drug Administration (FDA) determines to be withdrawn for safety or effectiveness reasons, we may immediately remove the drug from our formulary and later provide notice to members who take the drug.
- **Other changes.** We may add a new generic drug to replace a brand-name drug currently on the formulary, or add a new biosimilar to replace an original biological product currently on the formulary, or add new restrictions or move a drug we are keeping on the formulary to a higher cost-sharing tier or both after we add a corresponding drug. We may make changes based on new clinical guidelines. If we remove drugs from our formulary, add prior authorization, quantity limits and/or step therapy restrictions on a drug, or move a drug to a higher cost-sharing tier, we must notify affected members of the change at least 30 days before the change becomes effective. Alternatively, when a member requests a refill of the drug, they may receive a 30-day supply of the drug.

If we make these other changes, you or your prescriber can ask us to make an exception for you, and continue to cover the drug you have been taking. The notice we provide you will also include information on how to request an exception, and you can also find information in the section below entitled "how do I request an exception to the FirstCarolinaCare Formulary?"

Changes that will not affect you if you are currently taking the drug.

Generally, if you are taking a drug on our 2025 formulary that was covered at the beginning of the year, we will not discontinue or reduce coverage of the drug during the 2025 coverage year except as described above. This means these drugs will remain available at the same cost sharing and with no new restrictions for those members taking them for the remainder of the coverage year. You will not get direct notice this year about changes that do not affect you. However, on January 1 of the next year, such changes would affect you, and it is important to check the formulary for the new benefit year for any changes to drugs.

The enclosed formulary is current as of 10/1/24, Version 10. To get updated information about the drugs covered by FirstCarolinaCare, please contact us. Our contact information appears on the front and back cover pages. If there are negative changes made to the printed drug list within the covered year, you may be notified by mail identifying the changes. Drug lists located on our website are reviewed and updated on a monthly basis.

How do I use the Formulary?

There are two ways to find your drug within the formulary:

Medical Condition

The formulary begins on page 1. The drugs in this formulary are grouped into categories depending on the type of medical conditions that they are used to treat. For example, drugs used to treat a heart condition are listed under the category, “Cardiovascular Agents.” If you know what your drug is used for, look for the category name in the list that begins on page 1. Then look under the category name for your drug.

Alphabetical Listing

If you are not sure what category to look under, you should look for your drug in the Index that begins on page 72. The Index provides an alphabetical list of all of the drugs included in this document. Both brand name drugs and generic drugs are listed in the Index. Look in the Index and find your drug. Next to your drug, you will see the page number where you can find coverage information. Turn to the page listed in the Index and find the name of your drug in the first column of the list.

What are generic drugs?

FirstCarolinaCare covers both brand name drugs and generic drugs. A generic drug is approved by the FDA as having the same active ingredient as the brand name drug. Generally, generic drugs work just as well as and usually cost less than brand name drugs. There are generic drug substitutes available for many brand name drugs. Generic drugs usually can be substituted for the brand name drug at the pharmacy without needing a new prescription, depending on state laws.

What are original biological products and how are they related to biosimilars?

On the formulary, when we refer to drugs, this could mean a drug or a biological product. Biological products are drugs that are more complex than typical drugs. Since biological products are more complex than typical drugs, instead of having a generic form, they have alternatives that are called biosimilars. Generally, biosimilars work just as well as the original biological product and may cost less. There are biosimilar alternatives for some original biological products. Some biosimilars are interchangeable biosimilars and, depending on state laws, may be substituted for the original biological product at the pharmacy without needing a new prescription, just like generic drugs can be substituted for brand name drugs.

For discussion of drug types, please see the Evidence of Coverage, Chapter 5, Section 3.1, ‘The Drug List’ tells which Part D drugs are covered.

Are there any restrictions on my coverage?

Some covered drugs may have additional requirements or limits on coverage. These requirements and limits may include:

- **Prior Authorization:** FirstCarolinaCare requires you or your prescriber to get prior authorization for certain drugs. This means that you will need to get approval from FirstCarolinaCare before FirstCarolinaCare will cover your prescriptions. If you don’t get approval, FirstCarolinaCare may not cover the drug.
- **Quantity Limits:** For certain drugs, FirstCarolinaCare limits the amount of the drug that FirstCarolinaCare will cover. For example, FirstCarolinaCare provides 18 tablets per prescription of citalopram. This may be in addition to a standard one-month or three-month supply.

- **Step Therapy:** In some cases, FirstCarolinaCare requires you to first try certain drugs to treat your medical condition before we will cover another drug for that condition. For example, if Drug A and Drug B both treat your medical condition, FirstCarolinaCare may not cover Drug B unless you try Drug A first. If Drug A does not work for you, FirstCarolinaCare will then cover Drug B.

You can find out if your drug has any additional requirements or limits by looking in the formulary that begins on page 1. You can also get more information about the restrictions applied to specific covered drugs by visiting our website. We have posted online documents that explain our prior authorization and step therapy restrictions. You may also ask us to send you a copy. Our contact information, along with the date we last updated the formulary, appears on the front and back cover pages.

You can ask FirstCarolinaCare to make an exception to these restrictions or limits or for a list of other, similar drugs that may treat your health condition. See the section, “How do I request an exception to the FirstCarolinaCare formulary?” on page iii for information about how to request an exception.

What if my drug is not on the Formulary?

If your drug is not included in this formulary (list of covered drugs), you should first contact Member Services and ask if your drug is covered.

If you learn that FirstCarolinaCare does not cover your drug, you have two options:

- You can ask Member Services for a list of similar drugs that are covered by FirstCarolinaCare. When you receive the list, show it to your doctor and ask them to prescribe a similar drug that is covered by FirstCarolinaCare.
- You can ask FirstCarolinaCare to make an exception and cover your drug. See below for information about how to request an exception.

How do I request an exception to FirstCarolinaCare's formulary?

You can ask FirstCarolinaCare to make an exception to our coverage rules. There are several types of exceptions that you can ask us to make.

- You can ask us to cover a drug even if it is not on our formulary. If approved, this drug will be covered at a pre-determined cost-sharing level, and you would not be able to ask us to provide the drug at a lower cost-sharing level.
- You can ask us to waive a coverage restriction including prior authorization, step therapy, or a quantity limit on your drug. For example, for certain drugs, FirstCarolinaCare limits the amount of the drug that we will cover. If your drug has a quantity limit, you can ask us to waive the limit and cover a greater amount.
- You can ask us to cover a formulary drug at a lower cost-sharing level, unless the drug is on the specialty tier. If approved, this would lower the amount you must pay for your drug.

Generally, FirstCarolinaCare will only approve your request for an exception if the alternative drugs included on the plan's formulary, the lower cost-sharing drug, or applying the restriction would not be as effective for you and/or would cause you to have adverse effects.

You or your prescriber should contact us to ask for a tiering or, formulary exception, including an exception to a coverage restriction. **When you request an exception your prescriber will need to explain the medical reasons why you need the exception.** Generally, we must make our decision within 72 hours of getting your prescriber's supporting statement. You can ask for an expedited (fast) decision if you believe, and we agree, that your health could be seriously harmed by waiting up to 72 hours for a decision. If we agree, or if your prescriber asks for a fast decision, we must give you a decision no later than 24 hours after we get your prescriber's supporting statement.

What can I do if my drug is not on the formulary or has a restriction?

As a new or continuing member in our plan you may be taking drugs that are not on our formulary. Or, you may be taking a drug that is on our formulary but has a coverage restriction, such as prior authorization. You should talk to your prescriber about requesting a coverage decision to show that you meet the criteria for approval, switching to an alternative drug that we cover, or requesting a formulary exception so that we will cover the drug you take. While you and your doctor determine the right course of action for you, we may cover your drug in certain cases during the first 90 days you are a member of our plan.

For each of your drugs that is not on our formulary has a coverage restriction, we will cover a temporary 30-day supply. If your prescription is written for fewer days, we'll allow refills to provide up to a maximum 30-day supply of medication. If coverage is not approved, after your first 30-day supply, we will not pay for these drugs, even if you have been a member of the plan less than 90 days.

If you are a resident of a long-term care facility, and you need a drug that is not on our formulary or if your ability to get your drugs is limited, but you are past the first 90 days of membership in our plan, we will cover a 31-day emergency supply of that drug while you pursue a formulary exception.

FirstCarolinaCare provides transition fills for members who have a level-of-care change from one treatment setting to another. Please visit our website at FirstCarolinaCare.com/NHHA for further details.

For more information

For more detailed information about your FirstCarolinaCare prescription drug coverage, please review your Evidence of Coverage and other plan materials.

If you have questions about FirstCarolinaCare, please contact us. Our contact information, along with the date we last updated the formulary, appears on the front and back cover pages.

If you have general questions about Medicare prescription drug coverage, please call Medicare at 1-800-MEDICARE (1-800-633-4227) 24 hours a day/7 days a week. TTY users should call 1-877-486-2048. Or, visit <http://www.medicare.gov>.

FirstCarolinaCare Formulary

The formulary below provides coverage information about the drugs covered by FirstCarolinaCare. If you have trouble finding your drug in the list, turn to the Index that begins on page 72.

The first column of the chart lists the drug name. Brand name drugs are capitalized (e.g., TRADJENTA) and generic drugs are listed in lower-case italics (e.g., *atorvastatin*).

The information in the Requirements/Limits column tells you if FirstCarolinaCare has any special requirements for coverage of your drug.

Drug Name	Drug Tier	Requirements/Limits
Ophthalmic Agents		
<i>Ophthalmic Agents</i>		
CYSTARAN	5	PA, QL: 60 ML per 28 days

B/D This prescription drug has a Part B versus D administrative prior authorization requirement. This drug may be covered under Medicare Part B or D depending upon the circumstances. Information may need to be submitted describing the use and setting of the drug to make the determination.

EA Each.

PA Prior Authorization. FirstCarolinaCare requires you or your physician to get prior authorization for certain drugs. This means that you will need to get approval from FirstCarolinaCare before your prescription will be covered by FirstCarolinaCare. If you don't get approval, FirstCarolinaCare may not cover the drug.

QL Quantity Limit. For certain drugs, FirstCarolinaCare limits the amount of the drug that FirstCarolinaCare will cover. For example, FirstCarolinaCare provides 30 tablets per prescription for naratriptan hcl. This may be in addition to a standard one-month or three-month supply.

ST Step Therapy. In some cases, FirstCarolinaCare requires you to first try certain drugs to treat your medical condition before we will cover another drug for that condition. For example, if Drug A and Drug B both treat your medical condition, FirstCarolinaCare may not cover Drug B unless you try Drug A first. If Drug A does not work for you, FirstCarolinaCare will then cover Drug B.

PANSO Prior Authroization for New Starts Only.

ST NSO Step Therapy for New Starts Only.

Drug Name	Drug Tier	Requirements/Limits
Analgesics		
Nonsteroidal Anti-inflammatory Drugs		
<i>celecoxib caps</i>	2	
<i>diclofenac sodium dr</i>	1	
<i>diclofenac sodium er</i>	1	
<i>diclofenac sodium/misoprostol tbec 75mg; 200mcg</i>	2	
<i>diclofenac sodium gel 1%</i>	2	
<i>diclofenac sodium external soln 1.5%</i>	4	PA
<i>etodolac er</i>	2	
<i>fenoprofen calcium caps 400mg</i>	1	
<i>fenoprofen calcium tabs</i>	1	
<i>flurbiprofen tabs</i>	1	
<i>ibu</i>	1	
<i>ibuprofen susp</i>	1	
<i>ibuprofen tabs 400mg, 600mg, 800mg</i>	1	
<i>ketorolac tromethamine inj 15mg/ml, 30mg/ml</i>	2	
<i>meclofenamate sodium caps</i>	1	
<i>mefenamic acid caps</i>	2	
<i>meloxicam tabs</i>	1	
<i>nabumetone tabs</i>	1	
<i>naproxen sodium tabs 550mg</i>	1	
<i>naproxen susp</i>	5	
<i>naproxen tabs 250mg, 375mg, 500mg</i>	1	
<i>oxaprozin tabs</i>	2	
<i>piroxicam caps</i>	2	
<i>salsalate tabs</i>	2	
<i>sulindac tabs</i>	1	
Opioid Analgesics, Long-acting		
<i>buprenorphine ptwk 10mcg/hr, 15mcg/hr, 5mcg/hr, 7.5mcg/hr</i>	2	
<i>buprenorphine ptwk 20mcg/hr</i>	4	
<i>fentanyl pt72 25mcg/hr</i>	2	QL(10 EA per 30 days)
<i>fentanyl pt72 12mcg/hr, 37.5mcg/hr, 50mcg/hr, 62.5mcg/hr, 75mcg/hr</i>	4	QL(10 EA per 30 days)
<i>fentanyl pt72 100mcg/hr</i>	4	QL(20 EA per 30 days)
<i>fentanyl pt72 87.5mcg/hr</i>	5	QL(10 EA per 30 days)
<i>methadone hcl inj</i>	2	
<i>methadone hcl oral soln</i>	2	QL(1800 ML per 30 days)
<i>methadone hcl tabs</i>	2	QL(360 EA per 30 days)
<i>methadone hydrochloride intensol</i>	2	QL(1800 ML per 30 days)
<i>methadone hydrochloride conc</i>	2	QL(1800 ML per 30 days)
<i>methadose sugar-free</i>	2	QL(1800 ML per 30 days)
<i>methadose conc 10mg/ml</i>	2	QL(1800 ML per 30 days)
<i>morphine sulfate er cp24 100mg, 10mg, 20mg, 30mg, 50mg, 60mg, 80mg</i>	2	QL(60 EA per 30 days)

Formulary ID: 25411, Version: 10, Effective: 01/01/2025

Last Updated: 10/09/2024

You can find information on what the symbols and abbreviations in this table mean by going to the introduction pages of this document.

Drug Name	Drug Tier	Requirements/Limits
<i>morphine sulfate er tbcr</i>	2	QL(120 EA per 30 days)
OXYCODONE HYDROCHLORIDE ER T12A 40MG	2	QL(60 EA per 30 days)
OXYCODONE HYDROCHLORIDE ER T12A 80MG	5	QL(60 EA per 30 days)
<i>oxycodone hydrochloride er t12a 10mg, 20mg</i>	2	QL(60 EA per 30 days)
<i>oxymorphone hydrochloride er tb12 30mg</i>	4	QL(120 EA per 30 days)
<i>oxymorphone hydrochloride er tb12 10mg, 15mg, 20mg, 5mg, 7.5mg</i>	4	QL(60 EA per 30 days)
<i>oxymorphone hydrochlorideer</i>	4	QL(120 EA per 30 days)
<i>tramadol hcl er cp24 100mg, 200mg, 300mg</i>	4	QL(60 EA per 30 days); ST
<i>tramadol hcl er tb24</i>	4	QL(30 EA per 30 days); ST
<i>tramadol hydrochloride er</i>	4	QL(30 EA per 30 days); ST
Opioid Analgesics, Short-acting		
<i>acetaminophen/codeine phosphate tabs 300mg; 60mg</i>	2	QL(180 EA per 30 days)
<i>acetaminophen/codeine phosphate tabs 300mg; 15mg, 300mg; 30mg</i>	2	QL(360 EA per 30 days)
<i>acetaminophen/codeine soln</i>	2	QL(4500 ML per 30 days)
<i>acetaminophen/codeine tabs 300mg; 60mg</i>	2	QL(180 EA per 30 days)
<i>acetaminophen/codeine tabs 300mg; 15mg, 300mg; 30mg</i>	2	QL(360 EA per 30 days)
<i>ascomp/codeine</i>	2	
<i>butalbital/acetaminophen/caffeine/codeine caps 325mg; 50mg; 40mg; 30mg</i>	2	
<i>butalbital/aspirin/caffeine/codeine</i>	2	
<i>butorphanol tartrate inj</i>	2	
<i>butorphanol tartrate nasal soln</i>	2	QL(5 ML per 28 days)
CODEINE SULFATE TABS 60MG	4	QL(180 EA per 30 days)
<i>codeine sulfate tabs 15mg, 30mg</i>	2	QL(180 EA per 30 days)
<i>duramorph</i>	2	
<i>endocet tabs 325mg; 10mg, 325mg; 2.5mg, 325mg; 5mg, 325mg; 7.5mg</i>	2	QL(240 EA per 30 days)
<i>fentanyl citrate oral transmucosal lpop 200mcg</i>	4	QL(120 EA per 30 days); PA
<i>fentanyl citrate oral transmucosal lpop 1200mcg, 1600mcg, 400mcg, 600mcg, 800mcg</i>	5	QL(120 EA per 30 days); PA
<i>hydrocodone bitartrate/acetaminophen soln 325mg/15ml; 7.5mg/15ml</i>	2	QL(2700 ML per 30 days)
<i>hydrocodone bitartrate/acetaminophen tabs 300mg; 10mg, 300mg; 5mg, 300mg; 7.5mg, 325mg; 10mg, 325mg; 5mg</i>	2	QL(240 EA per 30 days)
<i>hydrocodone/acetaminophen tabs 325mg; 7.5mg</i>	2	QL(240 EA per 30 days)
<i>hydrocodone/ibuprofen tabs 7.5mg; 200mg</i>	2	QL(150 EA per 30 days)
<i>hydrocodone/ibuprofen tabs 10mg; 200mg, 5mg; 200mg</i>	4	QL(150 EA per 30 days)
<i>hydromorphone hcl liqd</i>	2	QL(1200 ML per 30 days)
<i>hydromorphone hcl inj 10mg/ml, 1mg/ml, 4mg/ml</i>	2	
<i>hydromorphone hcl tabs 8mg</i>	2	QL(120 EA per 30 days)
<i>hydromorphone hcl tabs 2mg, 4mg</i>	2	QL(180 EA per 30 days)
<i>hydromorphone hydrochloride inj 2mg/ml, 50mg/5ml</i>	2	

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Drug Name	Drug Tier	Requirements/Limits
<i>morphine sulfate tabs</i>	2	QL(180 EA per 30 days)
MORPHINE SULFATE INJ 10MG/ML, 2MG/ML, 4MG/ML	2	
<i>morphine sulfate inj 10mg/ml, 4mg/ml, 5mg/ml, 8mg/ml</i>	2	B/D
<i>morphine sulfate inj 0.5mg/ml, 10mg/ml, 1mg/ml, 2mg/ml, 4mg/ml, 8mg/ml</i>	2	
<i>morphine sulfate oral soln 100mg/5ml</i>	2	QL(200 ML per 30 days)
<i>morphine sulfate oral soln 20mg/5ml</i>	2	QL(300 ML per 30 days)
<i>morphine sulfate oral soln 10mg/5ml</i>	2	QL(700 ML per 30 days)
<i>nalbuphine hydrochloride</i>	1	
<i>oxycodone hcl caps</i>	2	QL(180 EA per 30 days)
<i>oxycodone hydrochloride soln</i>	2	QL(1300 ML per 30 days)
<i>oxycodone hydrochloride caps, tabs</i>	2	QL(180 EA per 30 days)
<i>oxycodone hydrochloride conc</i>	2	QL(180 ML per 30 days)
<i>oxycodone/acetaminophen tabs 325mg; 10mg, 325mg; 2.5mg, 325mg; 5mg, 325mg; 7.5mg</i>	2	QL(240 EA per 30 days)
<i>oxymorphone hydrochloride</i>	2	QL(180 EA per 30 days)
<i>tramadol hydrochloride/acetaminophen</i>	2	QL(240 EA per 30 days)
<i>tramadol hydrochloride tabs 100mg</i>	2	QL(120 EA per 30 days)
<i>tramadol hydrochloride tabs 50mg</i>	2	QL(240 EA per 30 days)
Anesthetics		
Local Anesthetics		
<i>glydo</i>	1	QL(30 ML per 30 days); PA
<i>lidocaine hcl jelly prsy</i>	1	QL(30 ML per 30 days); PA
<i>lidocaine hcl inj 0.5%, 1%, 1.5%, 2%, 4%</i>	1	
<i>lidocaine hcl prsy 2%</i>	1	QL(30 ML per 30 days); PA
<i>lidocaine hydrochloride external soln</i>	1	QL(250 ML per 30 days); PA
<i>lidocaine hydrochloride inj 1%, 2%</i>	1	
<i>lidocaine/prilocaine crea</i>	2	QL(60 GM per 30 days); PA
<i>lidocaine oint 5%</i>	2	QL(150 GM per 30 days); PA
<i>lidocaine ptch 5%</i>	2	PA
Anti-Addiction/Substance Abuse Treatment Agents		
Alcohol Deterrents/Anti-craving		
<i>acamprosate calcium dr</i>	2	
<i>disulfiram tabs</i>	2	
<i>naltrexone hcl tabs</i>	1	
VIVITROL	5	
Opioid Dependence		
<i>buprenorphine hcl/naloxone hcl</i>	2	QL(90 EA per 30 days)
<i>buprenorphine hcl subl</i>	2	QL(90 EA per 30 days)
<i>buprenorphine hcl inj</i>	4	
<i>buprenorphine hydrochloride/naloxone hydrochloride film</i>	2	QL(90 EA per 30 days)
<i>buprenorphine hydrochloride/naloxone hydrochloride subl 2mg; 0.5mg</i>	2	QL(90 EA per 30 days)
<i>lofexidine hydrochloride</i>	5	

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Drug Name	Drug Tier	Requirements/Limits
LUCEMYRA	5	
Opioid Reversal Agents		
<i>naloxone hcl inj 4mg/10ml</i>	1	
<i>naloxone hydrochloride liqd</i>	2	
<i>naloxone hydrochloride inj 0.4mg/ml, 2mg/2ml</i>	1	
OPVEE	3	
Smoking Cessation Agents		
<i>bupropion hydrochloride er (sr) tb12 150mg</i>	2	
NICOTROL INHALER	4	QL(480 EA per 30 days)
<i>varenicline starting month box</i>	2	
<i>varenicline tartrate tabs 1mg</i>	2	
<i>varenicline tartrate tabs 0.5mg, 1mg</i>	2	
Antibacterials		
Aminoglycosides		
<i>amikacin sulfate inj 1gm/4ml, 500mg/2ml</i>	2	
ARIKAYCE	5	QL(525 ML per 30 days); PA
<i>gentamicin sulfate pediatric</i>	1	
<i>gentamicin sulfate/0.9% sodium chloride inj 1.2mg/ml; 0.9%, 1.6mg/ml; 0.9%, 1mg/ml; 0.9%, 2mg/ml; 0.9%</i>	1	
<i>gentamicin sulfate crea 0.1%</i>	2	
<i>gentamicin sulfate inj 40mg/ml</i>	1	
<i>gentamicin sulfate oint 0.1%</i>	2	
<i>isotonic gentamicin inj 0.8mg/ml; 0.9%</i>	1	
<i>neomycin sulfate</i>	2	
<i>neomycin/polymyxin b sulfates</i>	2	
STREPTOMYCIN SULFATE INJ 1GM	5	
<i>tobramycin sulfate inj 1.2gm/30ml, 1.2gm, 40mg/ml</i>	2	
<i>tobramycin sulfate inj 10mg/ml, 80mg/2ml</i>	4	
ZEMDRI	5	
Antibacterials, Other		
<i>aztreonam inj 1gm</i>	2	
<i>aztreonam inj 2gm</i>	5	
<i>chloramphenicol sodium succinate</i>	1	
<i>clindacin etz pledgets</i>	2	
<i>clindamycin hcl caps 300mg</i>	1	
<i>clindamycin hydrochloride caps 150mg, 75mg</i>	1	
<i>clindamycin palmitate hydrochloride</i>	1	
<i>clindamycin phosphate/dextrose</i>	2	
<i>clindamycin phosphate crea 2%</i>	2	
<i>clindamycin phosphate inj 600mg/4ml, 900mg/60ml, 900mg/6ml</i>	1	
<i>clindamycin phosphate swab 1%</i>	2	
<i>colistimethate sodium</i>	5	
<i>daptomycin</i>	5	

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Drug Name	Drug Tier	Requirements/Limits
DAPTOMYCIN/SODIUM CHLORIDE	4	
<i>fosfomicin tromethamine</i>	2	
IMPAVIDO	5	
KIMYRSA	5	
<i>lincomycin hcl inj</i>	2	
<i>lincomycin hydrochloride</i>	2	
<i>linezolid tabs</i>	4	QL(56 EA per 28 days)
<i>linezolid susr</i>	5	QL(1800 ML per 28 days)
<i>linezolid inj 600mg/300ml</i>	4	
<i>methenamine hippurate</i>	2	
<i>metronidazole vaginal</i>	2	
<i>metronidazole caps 375mg</i>	1	
<i>metronidazole inj 500mg/100ml</i>	1	
<i>metronidazole tabs 250mg, 500mg</i>	1	
<i>nitrofurantoin macrocrystals</i>	2	
<i>nitrofurantoin monohydrate/macrocrystals</i>	2	
<i>nitrofurantoin monohydrate caps</i>	2	
NUVESSA	4	
ORBACTIV	5	
<i>polymyxin b sulfate inj</i>	2	
SIVEXTRO INJ	5	QL(6 EA per 30 days)
<i>tigecycline</i>	5	
<i>tinidazole</i>	4	
<i>trimethoprim tabs</i>	1	
<i>vancomycin hcl inj 0.9%; 1gm/200ml, 10gm</i>	4	
<i>vancomycin hydrochloride/dextrose inj 5%; 1gm/200ml, 5%; 500mg/100ml, 5%; 750mg/150ml</i>	4	
<i>vancomycin hydrochloride caps</i>	4	
VANCOMYCIN HYDROCHLORIDE INJ 1250MG/250ML, 1750MG/350ML, 750MG/150ML	4	
<i>vancomycin hydrochloride inj 1.75gm, 1000mg/200ml, 1gm, 2gm, 500mg, 5gm, 750mg</i>	4	
<i>vancomycin inj 0.9%; 500mg/100ml, 0.9%; 750mg/150ml</i>	4	
Beta-lactam, Cephalosporins		
AVYCAZ	5	
<i>cefaclor er tb12 500mg</i>	2	
<i>cefaclor caps</i>	2	
<i>cefaclor susr 250mg/5ml</i>	2	
<i>cefadroxil</i>	2	
<i>cefazolin sodium/dextrose inj 1gm; 4%, 2gm; 3%</i>	2	
<i>cefazolin sodium inj 100gm, 10gm, 1gm/50ml; 4%, 1gm, 300gm, 500mg</i>	2	
CEFAZOLIN/DEXTROSE INJ 3GM/150ML; 4%	2	
CEFAZOLIN INJ 2GM	2	

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<i>cefazolin inj 2gm, 3gm</i>	2	
<i>cefdinir</i>	2	
CEFEPIME	3	
CEFEPIME HYDROCHLORIDE INJ 100GM, 2GM	3	
CEFEPIME/DEXTROSE	3	
<i>cefixime</i>	2	
CEFOTAXIME SODIUM INJ 1GM	1	
<i>cefotaxime sodium inj 2gm</i>	1	
<i>cefotetan inj 1gm, 2gm</i>	1	
<i>cefoxitin sodium</i>	1	
<i>cefpodoxime proxetil</i>	2	
<i>cefprozil</i>	2	
<i>ceftazidime inj 1gm, 2gm, 6gm</i>	1	
<i>ceftriaxone in iso-osmotic dextrose inj 20mg/ml; 0</i>	4	
<i>ceftriaxone sodium inj 10gm, 1gm, 250mg, 2gm, 500mg</i>	4	
<i>ceftriaxone/dextrose</i>	4	
<i>cefuroxime axetil tabs</i>	2	
<i>cefuroxime sodium inj 1.5gm, 750mg</i>	2	
<i>cephalexin</i>	1	
FETROJA	5	
<i>tazicef inj 1gm, 2gm, 6gm</i>	1	
TEFLARO	5	
Beta-lactam, Penicillins		
<i>amoxicillin/clavulanate potassium</i>	2	
<i>amoxicillin/clavulanate potassium er</i>	2	
<i>amoxicillin chew 125mg, 250mg</i>	1	
<i>amoxicillin caps, susr, tabs</i>	1	
<i>ampicillin sodium inj</i>	1	
<i>ampicillin-sulbactam inj 10gm; 5gm, 1gm; 0.5gm</i>	1	
<i>ampicillin/sulbactam inj 2gm; 1gm</i>	1	
<i>ampicillin caps 500mg</i>	1	
AUGMENTIN SUSR 125MG/5ML; 31.25MG/5ML	4	
BICILLIN C-R INJ 300000UNIT/ML; 300000UNIT/ML, 900000UNIT/2ML; 300000UNIT/2ML	3	
BICILLIN L-A INJ 1200000UNIT/2ML, 2400000UNIT/4ML, 600000UNIT/ML	4	
<i>dicloxacillin sodium</i>	1	
NAFCILLIN	5	
<i>naficillin sodium inj 10gm, 1gm, 2gm</i>	4	
<i>oxacillin sodium inj 1.5gm/50ml; 1gm/50ml, 10gm, 1gm, 2gm, 300mg/50ml; 2gm/50ml</i>	2	
<i>penicillin g potassium in iso-osmotic dextrose</i>	1	
<i>penicillin g potassium inj 20000000unit, 5000000unit</i>	1	
<i>penicillin v potassium</i>	1	

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<i>piperacillin sodium/tazobactam sodium</i>	2	
Carbapenems		
<i>ertapenem sodium</i>	4	
<i>imipenem/cilastatin inj 250mg; 250mg</i>	1	
<i>imipenem/cilastatin inj 500mg; 500mg</i>	3	
MEROPENEM/SODIUM CHLORIDE INJ 1GM/50ML; 0.9%	4	
<i>meropenem/sodium chloride inj 500mg; 0.9%</i>	4	
<i>meropenem inj 1gm, 500mg</i>	3	
<i>meropenem inj 2gm</i>	4	
Macrolides		
<i>azithromycin pack, susr, tabs</i>	2	
<i>azithromycin inj 500mg</i>	2	
<i>clarithromycin er</i>	2	
<i>clarithromycin susr, tabs</i>	2	
DIFICID	5	
ERYTHROCIN LACTOBIONATE INJ 500MG	3	
<i>erythrocin stearate tabs 250mg</i>	2	
<i>erythromycin base tabs</i>	4	
<i>erythromycin dr cpep</i>	2	
<i>erythromycin dr tbec 500mg</i>	2	
<i>erythromycin dr tbec 250mg, 333mg</i>	4	
<i>erythromycin ethylsuccinate tabs</i>	4	
<i>erythromycin ethylsuccinate susr 200mg/5ml</i>	2	
<i>erythromycin ethylsuccinate susr 400mg/5ml</i>	5	
<i>erythromycin lactobionate</i>	5	
Quinolones		
BAXDELA TABS	5	
<i>ciprofloxacin hcl tabs 750mg</i>	1	
<i>ciprofloxacin hydrochloride tabs 250mg, 500mg</i>	1	
<i>ciprofloxacin i.v.-in d5w inj 200mg/100ml; 5%</i>	1	
<i>levofloxacin in d5w</i>	2	
LEVOFLOXACIN INJ 25MG/ML	2	
<i>levofloxacin oral soln 25mg/ml</i>	2	
<i>levofloxacin tabs 250mg, 500mg, 750mg</i>	2	
<i>moxifloxacin hydrochloride/sodium hydrochloride</i>	2	
<i>moxifloxacin hydrochloride inj 400mg/250ml</i>	2	
<i>moxifloxacin hydrochloride tabs 400mg</i>	2	
<i>ofloxacin tabs 300mg, 400mg</i>	1	
Sulfonamides		
<i>sodium sulfacetamide</i>	2	
<i>sulfacetamide sodium lotn 10%</i>	2	
<i>sulfadiazine tabs</i>	4	
<i>sulfamethoxazole/trimethoprim</i>	1	

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<i>sulfamethoxazole/trimethoprim ds</i>	1	
Tetracyclines		
<i>demeclocycline hcl tabs</i>	4	
<i>demeclocycline hydrochloride tabs 300mg</i>	4	
<i>doxy 100</i>	2	
<i>doxycycline hyclate caps 100mg, 50mg</i>	2	
<i>doxycycline hyclate inj 100mg</i>	2	
<i>doxycycline hyclate tabs 100mg</i>	2	
<i>doxycycline monohydrate caps 100mg, 50mg</i>	2	
<i>doxycycline monohydrate tabs</i>	2	
<i>doxycycline susr</i>	2	
MINOCIN INJ	5	
<i>minocycline hcl caps 75mg</i>	1	
<i>minocycline hcl tabs</i>	4	
<i>minocycline hydrochloride caps 100mg, 50mg</i>	1	
<i>mondoxyne nl caps 100mg</i>	2	
NUZYRA INJ	5	
NUZYRA TABS	5	QL(30 EA per 30 days)
<i>tetracycline hydrochloride caps</i>	2	
VIBRAMYCIN SYRP	4	
XERAVA	5	
Anticonvulsants		
Anticonvulsants, Other		
BRIVIACT	5	ST NSO
ELEPSIA XR	5	ST NSO
EPIDIOLEX	5	PA NSO
EPRONTIA	4	
<i>felbamate tabs</i>	2	
<i>felbamate susp</i>	4	
FINTEPLA	5	PA NSO
FYCOMPA SUSP	5	
FYCOMPA TABS 2MG	4	
FYCOMPA TABS 10MG, 12MG, 4MG, 6MG, 8MG	5	
<i>lamotrigine er</i>	2	
<i>lamotrigine starter kit/blue</i>	4	
<i>lamotrigine starter kit/green</i>	4	
<i>lamotrigine starter kit/orange</i>	4	
<i>lamotrigine titration</i>	4	
<i>lamotrigine chew, tabs</i>	1	
<i>levetiracetam er</i>	1	
<i>levetiracetam/sodium chloride</i>	2	
<i>levetiracetam oral soln, tabs</i>	1	
<i>levetiracetam inj 500mg/5ml</i>	1	

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<i>levetiracetam inj 1000mg/100ml; 750mg/100ml, 1500mg/100ml; 540mg/100ml, 500mg/100ml; 820mg/100ml</i>	2	
NAYZILAM	4	
<i>roweepra tabs 500mg</i>	1	
SPRITAM	4	ST NSO
<i>subvenite</i>	1	
<i>subvenite starter kit/blue</i>	4	
<i>subvenite starter kit/green</i>	4	
<i>subvenite starter kit/orange</i>	4	
<i>topiramate er cs24</i>	4	
<i>topiramate csp, tabs</i>	2	
<i>valproate sodium inj 100mg/ml</i>	1	
<i>valproic acid</i>	1	
Calcium Channel Modifying Agents		
<i>ethosuximide</i>	2	
METHSUXIMIDE	3	
Gamma-aminobutyric Acid (GABA) Modulating Agents		
<i>clobazam</i>	4	
<i>clonazepam odt</i>	2	
<i>clonazepam tabs</i>	2	
DIACOMIT	5	PA NSO
<i>diazepam rectal gel</i>	4	
<i>divalproex sodium dr tbec</i>	1	
<i>divalproex sodium er</i>	2	
<i>divalproex sodium csdr</i>	1	
<i>gabapentin caps, soln</i>	1	
<i>gabapentin tabs 600mg, 800mg</i>	1	
LIBERVANT	4	QL(10 EA per 30 days)
<i>phenobarbital sodium inj 130mg/ml, 65mg/ml</i>	2	
<i>phenobarbital elix 20mg/5ml</i>	2	
<i>phenobarbital tabs 100mg, 15mg, 16.2mg, 30mg, 32.4mg, 60mg, 64.8mg, 97.2mg</i>	2	
<i>pregabalin</i>	2	
<i>primidone tabs</i>	1	
SYMPAZAN	5	
<i>tiagabine hydrochloride</i>	4	
VALTOCO 10 MG DOSE	5	
VALTOCO 15 MG DOSE	5	
VALTOCO 20 MG DOSE	5	
VALTOCO 5 MG DOSE	5	
<i>vigabatrin</i>	5	
<i>vigadrone</i>	5	
VIGAFYDE	5	PA NSO
<i>vigpoder</i>	5	

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ZTALMY	5	PA NSO
Sodium Channel Agents		
APTIOM	5	ST NSO
<i>carbamazepine er</i>	2	
<i>carbamazepine chew, tabs</i>	1	
<i>carbamazepine susp</i>	2	
DILANTIN INFATABS	4	
DILANTIN CAPS 30MG	4	
<i>epitol</i>	1	
<i>fosphenytoin sodium</i>	1	
<i>lacosamide oral soln, tabs</i>	2	
<i>lacosamide inj</i>	5	
<i>oxcarbazepine tabs</i>	3	
<i>oxcarbazepine susp</i>	4	
<i>phenytek</i>	2	
<i>phenytoin infatabs</i>	1	
<i>phenytoin sodium extended</i>	2	
<i>phenytoin sodium inj</i>	1	
<i>phenytoin chew, susp</i>	1	
<i>rufinamide susp</i>	5	
<i>rufinamide tabs 200mg</i>	4	
<i>rufinamide tabs 400mg</i>	5	
VIMPAT INJ	3	
XCOPRI TABS	5	
XCOPRI TBPK 0	4	
XCOPRI TBPK 0	5	
ZONISADE	4	ST NSO
<i>zonisamide</i>	1	
Antidementia Agents		
Antidementia Agents, Other		
ERGOLOID MESYLATES TABS	2	
NAMZARIC C4PK	4	
NAMZARIC CP24	4	QL(30 EA per 30 days)
Cholinesterase Inhibitors		
<i>donepezil hcl tbdp</i>	1	
<i>donepezil hcl tabs 10mg</i>	1	
<i>donepezil hydrochloride odt</i>	1	
<i>donepezil hydrochloride tabs 10mg, 5mg</i>	1	
<i>galantamine hydrobromide er</i>	2	
<i>galantamine hydrobromide soln, tabs</i>	2	
<i>rivastigmine tartrate</i>	2	
<i>rivastigmine transdermal system</i>	4	
N-methyl-D-aspartate (NMDA) Receptor Antagonist		
<i>memantine hcl titration pak</i>	1	

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<i>memantine hydrochloride er</i>	4	
<i>memantine hydrochloride tabs</i>	1	
<i>memantine hydrochloride soln</i>	4	
Antidepressants		
<i>Antidepressants, Other</i>		
AUVELITY	5	QL(60 EA per 30 days); ST NSO
<i>bupropion hcl tabs 100mg</i>	1	
<i>bupropion hydrochloride er (sr) tb12 100mg, 150mg, 200mg</i>	1	
<i>bupropion hydrochloride er (xl) tb24 150mg, 300mg</i>	2	
<i>bupropion hydrochloride tabs 75mg</i>	1	
<i>mirtazapine odt</i>	1	
<i>mirtazapine tabs</i>	1	
<i>olanzapine/fluoxetine</i>	4	
<i>perphenazine/amitriptyline</i>	4	PA NSO
<i>quetiapine fumarate tabs 150mg</i>	1	
SPRAVATO 56MG DOSE	5	PA NSO
SPRAVATO 84MG DOSE	5	PA NSO
ZURZUVAE CAPS 30MG	5	QL(14 EA per 14 days); PA NSO
ZURZUVAE CAPS 20MG, 25MG	5	QL(28 EA per 14 days); PA NSO
<i>Monoamine Oxidase Inhibitors</i>		
EMSAM	5	QL(30 EA per 30 days)
MARPLAN	4	
<i>phenelzine sulfate</i>	2	
<i>tranylcypromine sulfate</i>	4	
<i>SSRIs/SNRIs (Selective Serotonin Reuptake Inhibitors/Serotonin and Norepinephrine Reuptake Inhibitor)</i>		
<i>citalopram hydrobromide soln, tabs</i>	1	
<i>desvenlafaxine er</i>	2	QL(30 EA per 30 days)
DRIZALMA SPRINKLE	4	
<i>duloxetine hydrochloride cpep 20mg, 30mg, 60mg</i>	2	
<i>escitalopram oxalate tabs</i>	1	
<i>escitalopram oxalate soln</i>	4	
FETZIMA	4	ST NSO
FETZIMA TITRATION PACK	4	ST NSO
<i>fluoxetine dr</i>	1	
<i>fluoxetine hydrochloride caps, soln</i>	1	
<i>fluoxetine hydrochloride tabs 60mg</i>	4	
<i>fluvoxamine maleate er</i>	4	
<i>fluvoxamine maleate tabs 100mg, 50mg</i>	1	
<i>fluvoxamine maleate tabs 25mg</i>	3	
<i>nefazodone hydrochloride</i>	2	
<i>paroxetine hcl er</i>	2	
<i>paroxetine hcl tabs 30mg, 40mg</i>	1	
<i>paroxetine hydrochloride er tb24 12.5mg, 25mg</i>	2	

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<i>paroxetine hydrochloride susp</i>	1	
<i>paroxetine hydrochloride tabs 10mg, 20mg</i>	1	
<i>sertraline hcl conc</i>	1	
<i>sertraline hcl tabs 50mg</i>	1	
<i>sertraline hydrochloride tabs 100mg, 25mg</i>	1	
<i>trazodone hydrochloride tabs 100mg, 150mg, 50mg</i>	1	
<i>trazodone hydrochloride tabs 300mg</i>	2	
TRINTELLIX	4	ST NSO
VENLAFAXINE BESYLATE ER	4	ST NSO
<i>venlafaxine hydrochloride</i>	1	
<i>venlafaxine hydrochloride er cp24</i>	1	
<i>venlafaxine hydrochloride er tb24 150mg, 75mg</i>	1	
<i>vilazodone hydrochloride</i>	2	QL(30 EA per 30 days)
Tricyclics		
<i>amitriptyline hcl tabs 100mg, 150mg, 25mg, 75mg</i>	4	PA NSO
<i>amitriptyline hydrochloride tabs 100mg, 10mg, 50mg</i>	4	PA NSO
<i>amoxapine</i>	2	
<i>clomipramine hydrochloride</i>	4	PA NSO
<i>desipramine hydrochloride</i>	2	
<i>doxepin hcl caps 75mg</i>	4	PA NSO
<i>doxepin hcl conc</i>	4	PA NSO
<i>doxepin hydrochloride caps 100mg, 10mg, 150mg, 25mg, 50mg</i>	4	PA NSO
<i>imipramine hcl tabs 25mg, 50mg</i>	4	PA NSO
<i>imipramine hydrochloride tabs 10mg</i>	4	PA NSO
<i>imipramine pamoate caps 150mg, 75mg</i>	4	PA NSO
<i>nortriptyline hcl caps 25mg, 75mg</i>	2	
<i>nortriptyline hcl soln</i>	2	
<i>nortriptyline hydrochloride caps 10mg, 50mg</i>	2	
<i>protriptyline hcl</i>	4	
<i>trimipramine maleate caps</i>	4	
Antiemetics		
Antiemetics, Other		
<i>compro</i>	2	
<i>dimenhydrinate inj</i>	1	
<i>droperidol inj</i>	1	
<i>meclizine hcl tabs 12.5mg</i>	2	
<i>prochlorperazine edisylate inj 10mg/2ml</i>	2	
<i>prochlorperazine maleate tabs</i>	2	
<i>prochlorperazine supp 25mg</i>	2	
<i>promethazine hcl supp 12.5mg, 25mg</i>	2	
<i>promethazine hcl tabs 12.5mg</i>	4	PA
<i>promethazine hydrochloride tabs 25mg, 50mg</i>	4	PA
<i>promethegan supp 12.5mg, 25mg</i>	2	

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<i>promethegan supp 50mg</i>	4	
<i>scopolamine</i>	2	
<i>Emetogenic Therapy Adjuncts</i>		
APONVIE	4	PA
<i>aprepitant</i>	4	PA
CINVANTI	4	PA
<i>dronabinol</i>	4	B/D
EMEND INJ, SUSR	4	PA
<i>fosaprepitant dimeglumine</i>	2	PA
<i>granisetron hcl inj 1mg/ml, 4mg/4ml</i>	2	
<i>granisetron hydrochloride tabs</i>	2	B/D
<i>granisetron hydrochloride inj</i>	2	
<i>ondansetron hcl soln</i>	2	B/D
<i>ondansetron hcl tabs 24mg</i>	2	B/D
<i>ondansetron hydrochloride tabs</i>	2	B/D
ONDANSETRON HYDROCHLORIDE INJ 4MG/2ML	2	
<i>ondansetron hydrochloride inj 40mg/20ml, 4mg/2ml</i>	2	
<i>ondansetron odt tbdp 4mg, 8mg</i>	2	B/D
<i>palonosetron hydrochloride</i>	4	
SANCUSO	5	
Antifungals		
<i>Antifungals</i>		
ABELCET	4	PA
<i>amphotericin b liposome</i>	5	PA
<i>amphotericin b inj</i>	4	B/D
<i>caspofungin acetate</i>	4	
<i>clotrimazole crea, soln, troc</i>	2	
CRESEMBA	5	PA
<i>econazole nitrate crea</i>	2	
<i>fluconazole in nacl inj 200mg/100ml; 0.9%</i>	2	
<i>fluconazole in sodium chloride</i>	2	
<i>fluconazole susr, tabs</i>	2	
<i>flucytosine caps</i>	5	
<i>griseofulvin microsize</i>	2	
<i>griseofulvin ultramicrosize tabs 125mg, 250mg</i>	2	
<i>itraconazole caps</i>	2	
<i>ketoconazole crea, sham, tabs</i>	2	
<i>klayesta</i>	2	
<i>micafungin</i>	4	
<i>miconazole 3 supp</i>	1	
<i>naftifine hcl</i>	4	ST
<i>naftifine hydrochloride crea</i>	4	ST
NOXAFIL INJ	5	
<i>nyamyc</i>	2	

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<i>nystatin crea, oint, powd, susp, tabs</i>	2	
<i>nystop</i>	2	
ORAVIG	4	
<i>posaconazole dr</i>	5	
<i>posaconazole inj</i>	5	
<i>terbinafine hcl tabs</i>	2	
<i>terconazole</i>	2	
<i>voriconazole tabs</i>	4	
<i>voriconazole susr</i>	5	
<i>voriconazole inj</i>	5	PA
Antigout Agents		
<i>Antigout Agents</i>		
<i>allopurinol tabs 100mg, 300mg</i>	1	
<i>colchicine tabs 0.6mg</i>	2	
<i>febuxostat tabs 80mg</i>	2	
KRYSTEXXA	5	PA
<i>probenecid/colchicine</i>	1	
<i>probenecid tabs</i>	1	
Antimigraine Agents		
<i>Calcitonin Gene-Related Peptide (CGRP) Receptor Antagonists</i>		
AIMOVIG	3	QL(2 ML per 30 days); PA
EMGALITY INJ 120MG/ML	3	QL(2 ML per 28 days); PA
EMGALITY INJ 100MG/ML	3	QL(3 ML per 30 days); PA
NURTEC	4	QL(18 EA per 30 days); PA
<i>Ergot Alkaloids</i>		
<i>dihydroergotamine mesylate soln</i>	5	QL(8 ML per 23 days)
ERGOMAR	4	
ERGOTAMINE TARTRATE/CAFFEINE	3	
MIGERGOT	5	
<i>Prophylactic</i>		
<i>timolol maleate tabs 10mg, 20mg, 5mg</i>	1	
VYEPTI	5	PA
<i>Serotonin (5-HT) Receptor Agonist</i>		
REYVOW TABS 50MG	4	QL(4 EA per 30 days); PA
REYVOW TABS 100MG	4	QL(8 EA per 30 days); PA
<i>rizatriptan benzoate</i>	2	QL(18 EA per 30 days)
<i>rizatriptan benzoate odt</i>	2	QL(18 EA per 30 days)
SUMATRIPTAN SUCCINATE REFILL	2	QL(4 ML per 30 days)
<i>sumatriptan succinate tabs</i>	2	QL(9 EA per 30 days)
<i>sumatriptan succinate inj 6mg/0.5ml</i>	2	QL(6 ML per 30 days)
<i>sumatriptan succinate inj 4mg/0.5ml, 6mg/0.5ml</i>	4	QL(4 ML per 30 days)
<i>sumatriptan soln 20mg/act</i>	2	QL(12 EA per 30 days)
<i>sumatriptan soln 5mg/act</i>	2	QL(18 EA per 30 days)
<i>zolmitriptan tabs</i>	2	QL(9 EA per 30 days)

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Drug Name	Drug Tier	Requirements/Limits
Antimyasthenic Agents		
<i>Parasympathomimetics</i>		
<i>pyridostigmine bromide er</i>	4	
<i>pyridostigmine bromide soln</i>	4	
<i>pyridostigmine bromide tabs 60mg</i>	2	
REGONOL INJ 10MG/2ML	3	
Antimycobacterials		
<i>Antimycobacterials, Other</i>		
<i>dapsone tabs</i>	2	
PRETOMANID	4	QL(30 EA per 30 days); PA
<i>rifabutin</i>	4	
<i>Antituberculars</i>		
<i>cycloserine</i>	5	
<i>ethambutol hydrochloride</i>	2	
<i>isoniazid inj, tabs</i>	1	
<i>isoniazid syrp</i>	4	
PRIFTIN	4	
<i>pyrazinamide tabs</i>	4	
<i>rifampin caps, inj</i>	2	
SIRTURO	5	PA
TRECTOR	4	
Antineoplastics		
<i>Alkylating Agents</i>		
<i>bendamustine hydrochloride</i>	5	PA NSO
BENDEKA	5	PA NSO
<i>busulfan</i>	5	
BUSULFEX	5	
<i>carboplatin inj 150mg/15ml, 450mg/45ml, 50mg/5ml, 600mg/60ml</i>	1	
CARMUSTINE INJ 300MG, 50MG	5	
<i>carmustine inj 100mg</i>	5	
<i>cisplatin inj 100mg/100ml, 200mg/200ml, 50mg/50ml</i>	1	
CYCLOPHOSPHAMIDE MONOHYDRATE INJ	5	
CYCLOPHOSPHAMIDE CAPS, TABS	3	B/D
CYCLOPHOSPHAMIDE INJ 2GM/10ML	5	
CYCLOPHOSPHAMIDE INJ 1GM/5ML, 500MG/2.5ML, 500MG/ML	5	
<i>cyclophosphamide inj 500mg</i>	2	
<i>cyclophosphamide inj 1000mg/10ml, 1gm/2ml, 1gm, 2000mg/20ml, 2gm/4ml, 2gm, 500mg/5ml</i>	5	
<i>dacarbazine inj 100mg, 200mg</i>	1	
EVOMELA	5	PA NSO
GLEOSTINE CAPS 10MG, 40MG	4	
GLEOSTINE CAPS 100MG	5	

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IFOSFAMIDE INJ 1GM/20ML	1	
<i>ifosfamide inj 3gm/60ml</i>	1	
<i>kemoplat</i>	1	
LEUKERAN	5	
MATULANE	5	PA NSO
<i>melphalan hydrochloride</i>	2	PA NSO
<i>oxaliplatin inj 50mg/10ml</i>	2	
<i>oxaliplatin inj 100mg/20ml, 100mg, 50mg</i>	5	
<i>paraplatin inj 1000mg/100ml</i>	1	
TEMODAR INJ	5	PA NSO
<i>thiotepa inj 100mg, 15mg</i>	5	PA NSO
TREANDA INJ 100MG, 25MG	5	PA NSO
VALCHLOR	5	PA NSO
YONDELIS	5	PA NSO
ZANOSAR	5	
ZEPZELCA	5	PA NSO
Antiandrogens		
<i>abiraterone acetate tabs 250mg</i>	4	PA NSO
<i>abiraterone acetate tabs 500mg</i>	5	PA NSO
<i>bicalutamide</i>	1	
ERLEADA	5	PA NSO
<i>nilutamide</i>	5	
NUBEQA	5	PA NSO
XTANDI	5	PA NSO
YONSA	5	PA NSO
Antiangiogenic Agents		
<i>lenalidomide</i>	5	PA NSO
POMALYST	5	QL(21 EA per 28 days); PA NSO
THALOMID	5	PA NSO
Antiestrogens/Modifiers		
EMCYT	5	
FASLODEX INJ 250MG/5ML	5	
<i>fulvestrant</i>	5	
ORSERDU	5	PA NSO
SOLTAMOX	5	
<i>tamoxifen citrate tabs</i>	1	
<i>toremifene citrate</i>	5	PA NSO
Antimetabolites		
ALIMTA	5	PA NSO
ARRANON	5	
<i>cladribine</i>	5	B/D
<i>clofarabine</i>	5	
<i>cytarabine aqueous</i>	1	B/D
<i>cytarabine inj 100mg/ml, 20mg/ml</i>	1	B/D

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Drug Name	Drug Tier	Requirements/Limits
DROXIA CAPS 200MG	3	
DROXIA CAPS 300MG, 400MG	4	
FLOXURIDINE INJ	5	B/D
<i>fluorouracil inj 1gm/20ml, 2.5gm/50ml, 500mg/10ml, 5gm/100ml</i>	2	B/D
FOLOTYN INJ 40MG/2ML	5	
<i>folotyn inj 20mg/ml</i>	5	
<i>gemcitabine hydrochloride inj 1gm/26.3ml, 200mg/5.26ml, 2gm/52.6ml</i>	2	
<i>gemcitabine hydrochloride inj 1gm/10ml, 200mg/2ml, 2gm/20ml</i>	5	
<i>hydroxyurea caps</i>	1	
<i>mercaptopurine tabs</i>	2	
<i>nelarabine</i>	5	
<i>pemetrexed disodium</i>	5	PA NSO
PEMETREXED INJ 1GM/40ML	4	PA NSO
PEMETREXED INJ 100MG/4ML, 100MG, 1GM/40ML, 500MG/20ML, 500MG, 850MG/34ML	5	PA NSO
<i>pemetrexed inj 1000mg, 100mg, 500mg, 750mg</i>	5	PA NSO
PEMFEXY	5	PA NSO
PEMRYDI RTU	5	PA NSO
PRALATREXATE	5	
PURIXAN	5	
TABLOID	5	PA NSO
VYXEOS	5	PA NSO
Antineoplastics, Other		
ABRAXANE	5	
<i>adriamycin inj 50mg</i>	1	B/D
ADSTILADRIN	5	PA NSO
AKEEGA	5	PA NSO
ANKTIVA	5	PA NSO
<i>arsenic trioxide</i>	5	
<i>azacitidine</i>	5	
<i>bleomycin sulfate</i>	1	B/D
BORTEZOMIB INJ 1MG, 2.5MG, 3.5MG/1.4ML	4	PA NSO
BORTEZOMIB INJ 3.5MG	5	PA NSO
<i>bortezomib inj 3.5mg</i>	5	PA NSO
COLUMVI	5	PA NSO
<i>dactinomycin</i>	5	PA NSO
<i>daunorubicin hydrochloride</i>	1	
<i>decitabine</i>	5	
DOCETAXEL INJ 80MG/8ML	5	
<i>docetaxel inj 160mg/16ml, 20mg/ml, 80mg/4ml</i>	2	
<i>docetaxel inj 160mg/8ml, 20mg/2ml</i>	5	

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<i>doxorubicin hcl inj 2mg/ml, 50mg</i>	1	B/D
<i>doxorubicin hydrochloride liposomal</i>	5	
<i>doxorubicin hydrochloride inj 10mg</i>	1	B/D
ELREXFIO	5	PA NSO
ELZONRIS	5	PA NSO
EPKINLY	5	PA NSO
<i>eribulin mesylate</i>	5	
HALAVEN	5	
IBRANCE TABS 100MG, 125MG, 75MG	5	PA NSO
<i>idarubicin hcl</i>	5	
<i>idarubicin hydrochloride</i>	5	
IMDELLTRA	5	PA NSO
INREBIC	5	PA NSO
ISTODAX	5	
IWILFIN	5	PA NSO
IXEMPRA KIT	5	
JEVTANA	5	
KIMMTRAK	5	PA NSO
KISQALI FEMARA 200 DOSE	5	PA NSO
KISQALI FEMARA 400 DOSE	5	PA NSO
KISQALI FEMARA 600 DOSE	5	PA NSO
LAZCLUZE TABS 240MG	5	PA NSO
LAZCLUZE TABS 80MG	5	QL(60 EA per 30 days); PA NSO
<i>leucovorin calcium inj 100mg/10ml, 100mg, 200mg, 350mg, 500mg, 50mg</i>	1	
<i>leucovorin calcium tabs 5mg</i>	1	
<i>leucovorin calcium tabs 10mg, 15mg, 25mg</i>	4	
<i>levoleucovorin inj 50mg</i>	5	
LONSURF	5	PA NSO
LYSODREN	5	
<i>mitomycin inj 20mg, 40mg, 5mg</i>	5	
<i>mutamycin</i>	5	
OGSIVEO	5	PA NSO
OJEMDA	5	PA NSO
ONCASPAR	5	
ONUREG	5	
<i>paclitaxel</i>	1	
PACLITAXEL PROTEIN-BOUND PARTICLES	5	
PEMETREXED INJ 100MG/4ML	5	PA NSO
PHEGO	5	PA NSO
PROLEUKIN	5	
ROMIDEPSIN INJ 27.5MG/5.5ML	5	
<i>romidepsin inj 10mg</i>	5	
RYLAZE	5	

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TALVEY	5	PA NSO
TECVAYLI	5	PA NSO
TICE BCG	4	
TRISENOX INJ 12MG/6ML	5	
<i>valrubicin</i>	5	
VALSTAR	5	
VELCADE	5	PA NSO
<i>vinblastine sulfate inj 1mg/ml</i>	1	B/D
<i>vincristine sulfate inj 1mg/ml</i>	1	B/D
<i>vinorelbine tartrate</i>	1	
VONJO	5	PA NSO
ZALTRAP	5	
ZOLINZA	5	PA NSO
Antineoplastics		
OPDUALAG	5	PA NSO
Aromatase Inhibitors, 3rd Generation		
<i>anastrozole tabs</i>	1	
<i>exemestane</i>	2	
<i>letrozole</i>	2	
Enzyme Inhibitors		
ETOPOPHOS	5	
<i>etoposide inj 100mg/5ml, 1gm/50ml, 500mg/25ml</i>	1	
<i>irinotecan hydrochloride inj 100mg/5ml, 40mg/2ml</i>	1	
KYPROLIS	5	
<i>topotecan hcl inj 4mg/4ml</i>	2	
<i>topotecan hydrochloride</i>	2	
Molecular Target Inhibitors		
ALECENSA	5	PA NSO
ALIQOPA	5	PA NSO
ALUNBRIG	5	PA NSO
AUGTYRO	5	PA NSO
AYVAKIT	5	PA NSO
BALVERSA	5	PA NSO
BELEODAQ	5	PA NSO
BOSULIF	5	PA NSO
BRAFTOVI CAPS 75MG	5	PA NSO
BRUKINSA	5	PA NSO
CABOMETYX	5	QL(30 EA per 30 days); PA NSO
CALQUENCE	5	PA NSO
CAPRELSA	5	PA NSO
COMETRIQ	5	PA NSO
COPIKTRA	5	PA NSO
COTELLIC	5	PA NSO
<i>dasatinib</i>	5	PA NSO

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DAURISMO	5	PA NSO
ERIVEDGE	5	PA NSO
<i>erlotinib hydrochloride tabs 100mg</i>	4	PA NSO
<i>erlotinib hydrochloride tabs 150mg, 25mg</i>	5	PA NSO
<i>everolimus tabs 10mg, 2.5mg, 5mg, 7.5mg</i>	5	PA NSO
<i>everolimus tbso 2mg, 3mg, 5mg</i>	5	PA NSO
EXKIVITY	5	PA NSO
FLUDARABINE PHOSPHATE INJ 50MG	5	
<i>fludarabine phosphate inj 50mg/2ml</i>	1	
FOTIVDA	5	PA NSO
FRUZAQLA	5	PA NSO
FYARRO	5	PA NSO
GAVRETO	5	PA NSO
<i>gefitinib</i>	5	PA NSO
GILOTRIF	5	PA NSO
IBRANCE CAPS 100MG, 125MG, 75MG	5	PA NSO
ICLUSIG	5	PA NSO
IDHIFA	5	PA NSO
<i>imatinib mesylate tabs 100mg</i>	3	PA NSO
<i>imatinib mesylate tabs 400mg</i>	4	PA NSO
IMBRUVICA CAPS, SUSP	5	PA NSO
IMBRUVICA TABS 420MG	5	PA NSO
INLYTA	5	PA NSO
INQOVI	5	PA NSO
JAKAFI	5	QL(60 EA per 30 days); PA NSO
JAYPIRCA TABS 100MG	5	PA NSO
JAYPIRCA TABS 50MG	5	QL(30 EA per 30 days); PA NSO
KISQALI	5	PA NSO
KOSELUGO	5	PA NSO
KRAZATI	5	PA NSO
<i>lapatinib ditosylate</i>	5	PA NSO
LENVIMA 10 MG DAILY DOSE	5	PA NSO
LENVIMA 12MG DAILY DOSE	5	PA NSO
LENVIMA 14 MG DAILY DOSE	5	PA NSO
LENVIMA 18 MG DAILY DOSE	5	PA NSO
LENVIMA 20 MG DAILY DOSE	5	PA NSO
LENVIMA 24 MG DAILY DOSE	5	PA NSO
LENVIMA 4 MG DAILY DOSE	5	PA NSO
LENVIMA 8 MG DAILY DOSE	5	PA NSO
LORBRENA	5	PA NSO
LUMAKRAS	5	PA NSO
LYNPARZA TABS	5	PA NSO
LYTGOBI	5	PA NSO
MEKINIST	5	PA NSO

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MEKTOVI	5	PA NSO
NERLYNX	5	PA NSO
NINLARO	5	PA NSO
ODOMZO	5	PA NSO
OJJAARA	5	PA NSO
<i>pazopanib hydrochloride</i>	5	PA NSO
PEMAZYRE	5	PA NSO
PIQRAY 200MG DAILY DOSE	5	PA NSO
PIQRAY 250MG DAILY DOSE	5	PA NSO
PIQRAY 300MG DAILY DOSE	5	PA NSO
QINLOCK	5	PA NSO
RETEVMO TABS	5	PA NSO
RETEVMO CAPS	5	PA NSO
REZLIDHIA	5	PA NSO
ROZLYTREK	5	PA NSO
RUBRACA	5	PA NSO
RYDAPT	5	PA NSO
SCEMBLIX TABS 100MG	5	PA NSO
SCEMBLIX TABS 20MG, 40MG	5	PA NSO
<i>sorafenib</i>	5	PA NSO
<i>sorafenib tosylate</i>	5	PA NSO
SPRYCEL	5	PA NSO
STIVARGA	5	PA NSO
<i>sunitinib malate</i>	5	PA NSO
TABRECTA	5	PA NSO
TAFINLAR	5	PA NSO
TAGRISSE	5	PA NSO
TALZENNA	5	PA NSO
TASIGNA	5	PA NSO
TAZVERIK	5	PA NSO
<i>temsirolimus</i>	5	
TEPMETKO	5	PA NSO
TIBSOVO	5	PA NSO
TORISEL	5	
<i>torpenz</i>	5	PA NSO
TRUQAP TABS	5	PA NSO
TUKYSA	5	PA NSO
TURALIO CAPS 125MG	5	PA NSO
VANFLYTA	5	PA NSO
VENCLEXTA STARTING PACK	5	PA NSO
VENCLEXTA TABS 10MG	3	PA NSO
VENCLEXTA TABS 100MG, 50MG	5	PA NSO
VERZENIO	5	PA NSO
VITRAKVI	5	PA NSO

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VIZIMPRO	5	PA NSO
XALKORI	5	PA NSO
XOSPATA	5	PA NSO
XPOVIO	5	PA NSO
XPOVIO 60 MG TWICE WEEKLY	5	PA NSO
XPOVIO 80 MG TWICE WEEKLY	5	PA NSO
ZEJULA CAPS	5	PA NSO
ZEJULA TABS 200MG, 300MG	5	PA NSO
ZEJULA TABS 100MG	5	QL(30 EA per 30 days); PA NSO
ZELBORAF	5	PA NSO
ZYDELIG	5	PA NSO
ZYKADIA TABS	5	PA NSO
<i>Monoclonal Antibodies/Antibody-Drug Conjugates</i>		
ADCETRIS	5	
ALYMSYS	5	PA NSO
ARZERRA	5	
AVASTIN	5	
BAVENCIO	5	PA NSO
BESPONSA	5	PA NSO
BLINCYTO	5	PA NSO
CYRAMZA	5	PA NSO
DANYELZA	5	PA NSO
DARZALEX	5	PA NSO
DARZALEX FASPRO	5	PA NSO
ELAHERE	5	PA NSO
EMPLICITI	5	PA NSO
ENHERTU	5	PA NSO
ERBITUX	5	PA NSO
GAZYVA	5	PA NSO
HERCEPTIN HYLECTA	5	PA NSO
HERCEPTIN INJ 150MG	5	PA NSO
HERZUMA	5	PA NSO
IMFINZI	5	PA NSO
IMJUDO	5	PA NSO
JEMPERLI	5	PA NSO
KADCYLA	5	
KANJINTI	5	PA NSO
KEYTRUDA INJ 100MG/4ML	5	PA NSO
LIBTAYO	5	PA NSO
LOQTORZI	5	PA NSO
LUNSUMIO	5	PA NSO
MARGENZA	5	PA NSO
MONJUVI	5	PA NSO
MVASI	5	PA NSO

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Drug Name	Drug Tier	Requirements/Limits
MYLOTARG	5	PA NSO
OGIVRI	5	PA NSO
ONTRUZANT	5	PA NSO
OPDIVO	5	PA NSO
PADCEV	5	PA NSO
PERJETA	5	PA NSO
POLIVY	5	PA NSO
PORTRAZZA	5	PA NSO
RIABNI	5	PA NSO
RITUXAN	5	PA NSO
RITUXAN HYCELA	5	PA NSO
RUXIENCE	5	PA NSO
RYBREVANT	5	PA NSO
SARCLISA	5	PA NSO
TECENTRIQ	5	PA NSO
TECENTRIQ HYBREZA	5	PA NSO
TEVIMBRA	5	PA NSO
TIVDAK	5	PA NSO
TRAZIMERA	5	PA NSO
TRODELVY	5	PA NSO
TRUXIMA	5	PA NSO
VECTIBIX INJ 100MG/5ML, 400MG/20ML	5	PA NSO
VEGZELMA	5	PA NSO
YERVOY	5	PA NSO
ZYNLONTA	5	PA NSO
ZYNYZ	5	PA NSO
Retinoids		
<i>bexarotene</i>	5	PA NSO
PANRETIN	5	
<i>tretinoin caps 10mg</i>	5	PA NSO
Treatment Adjuncts		
<i>dexrazoxane</i>	5	
ELITEK	5	PA
<i>mesna</i>	1	
MESNEX TABS	5	
VORANIGO TABS 40MG	5	PA NSO
VORANIGO TABS 10MG	5	QL(60 EA per 30 days); PA NSO
Antiparasitics		
Anthelmintics		
<i>albendazole tabs</i>	5	
<i>ivermectin tabs 3mg</i>	2	PA
<i>praziquantel tabs</i>	4	
Antiprotozoals		
<i>atovaquone</i>	4	

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<i>atovaquone/proguanil hcl</i>	2	
<i>chloroquine phosphate tabs</i>	1	
COARTEM	4	
<i>hydroxychloroquine sulfate tabs</i>	1	
<i>mefloquine hcl</i>	1	
<i>nitazoxanide</i>	5	
<i>pentamidine isethionate inhalation solr</i>	2	B/D
<i>pentamidine isethionate inj</i>	2	
PRIMAQUINE PHOSPHATE TABS	3	
<i>pyrimethamine tabs</i>	5	
<i>quinine sulfate caps 324mg</i>	2	PA
Antiparkinson Agents		
Anticholinergics		
<i>benztropine mesylate tabs</i>	1	
<i>trihexyphenidyl hydrochloride</i>	2	
Antiparkinson Agents, Other		
<i>carbidopa/levodopa/entacapone</i>	4	
<i>entacapone</i>	2	
ONGENTYS	4	ST
<i>tolcapone</i>	5	
Dopamine Agonists		
<i>apomorphine hydrochloride inj</i>	5	PA
<i>bromocriptine mesylate caps, tabs</i>	2	
<i>pramipexole dihydrochloride</i>	1	
<i>ropinirole er</i>	2	
<i>ropinirole hcl tabs 0.5mg, 1mg, 2mg, 4mg, 5mg</i>	1	
<i>ropinirole hydrochloride tabs 0.25mg, 3mg</i>	1	
Dopamine Precursors and/or L-Amino Acid Decarboxylase Inhibitors		
<i>carbidopa/levodopa</i>	1	
<i>carbidopa/levodopa er</i>	2	
<i>carbidopa/levodopa odt</i>	1	
<i>carbidopa tabs</i>	4	
RYTARY	4	
Monoamine Oxidase B (MAO-B) Inhibitors		
<i>rasagiline mesylate tabs</i>	2	
<i>selegiline hcl caps, tabs</i>	2	
Antipsychotics		
1st Generation/Typical		
<i>chlorpromazine hcl inj</i>	2	
<i>chlorpromazine hydrochloride conc, tabs</i>	2	
<i>fluphenazine decanoate inj</i>	2	
<i>fluphenazine hcl conc</i>	2	
<i>fluphenazine hcl tabs 1mg</i>	2	

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<i>fluphenazine hydrochloride elix, inj</i>	2	
<i>fluphenazine hydrochloride tabs 10mg, 2.5mg, 5mg</i>	2	
<i>haloperidol decanoate inj</i>	2	
<i>haloperidol lactate</i>	2	
<i>haloperidol conc, tabs</i>	2	
<i>loxapine</i>	1	
MOLINDONE HYDROCHLORIDE	3	
<i>perphenazine tabs</i>	2	
<i>pimozide</i>	2	
<i>thioridazine hcl tabs 100mg, 10mg, 25mg, 50mg</i>	2	
<i>thiothixene caps 10mg, 1mg, 2mg, 5mg</i>	4	
<i>trifluoperazine hcl tabs 10mg, 2mg, 5mg</i>	1	
<i>trifluoperazine hydrochloride tabs 1mg</i>	1	
2nd Generation/Atypical		
ABILIFY MAINTENA	5	ST NSO
ABILIFY MYCITE MAINTENANCE KIT	5	QL(30 EA per 30 days); ST NSO
ABILIFY MYCITE STARTER KIT	5	QL(30 EA per 30 days); ST NSO
<i>aripiprazole</i>	2	
<i>aripiprazole odt tbdp 15mg</i>	4	
<i>aripiprazole odt tbdp 10mg</i>	5	
ARISTADA	5	ST NSO
ARISTADA INITIO	5	ST NSO
ASENAPINE MALEATE SL	4	
CAPLYTA	5	QL(30 EA per 30 days); ST NSO
FANAPT	5	ST NSO
FANAPT TITRATION PACK	4	ST NSO
INVEGA HAFYERA	5	ST NSO
INVEGA SUSTENNA INJ 39MG/0.25ML	4	ST NSO
INVEGA SUSTENNA INJ 117MG/0.75ML, 156MG/ML, 234MG/1.5ML, 78MG/0.5ML	5	ST NSO
INVEGA TRINZA	5	ST NSO
<i>lurasidone hydrochloride</i>	2	
LYBALVI	5	QL(30 EA per 30 days); ST NSO
NUPLAZID CAPS	5	QL(30 EA per 30 days); PA NSO
NUPLAZID TABS 10MG	5	QL(90 EA per 30 days); PA NSO
<i>olanzapine odt</i>	2	
OLANZAPINE INJ	3	
<i>olanzapine tabs</i>	2	
<i>paliperidone er</i>	4	ST NSO
PERSERIS	5	ST NSO
<i>quetiapine fumarate er</i>	2	
<i>quetiapine fumarate tabs 100mg, 200mg, 25mg, 300mg, 400mg, 50mg</i>	1	
REXULTI	5	ST NSO

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RISPERDAL CONSTA INJ 12.5MG, 25MG	4	ST NSO
RISPERDAL CONSTA INJ 37.5MG, 50MG	5	ST NSO
<i>risperidone</i>	2	
<i>risperidone er inj 12.5mg</i>	2	
<i>risperidone er inj 25mg</i>	4	
<i>risperidone er inj 37.5mg, 50mg</i>	5	
<i>risperidone odt</i>	2	
SECUADO	5	ST NSO
VRAYLAR CPPK	4	QL(14 EA per 365 days); ST NSO
VRAYLAR CAPS	5	QL(30 EA per 30 days); ST NSO
<i>ziprasidone hcl</i>	2	
<i>ziprasidone mesylate</i>	2	ST NSO
ZYPREXA RELPREVV INJ 210MG	4	ST NSO
ZYPREXA RELPREVV INJ 300MG, 405MG	5	ST NSO
Treatment-Resistant		
<i>clozapine odt</i>	4	
<i>clozapine tabs 100mg, 200mg, 25mg, 50mg</i>	2	
VERSACLOZ	5	
Antispasticity Agents		
Antispasticity Agents		
<i>baclofen inj 500mcg/ml</i>	4	B/D
<i>baclofen inj 20000mcg/20ml, 40mg/20ml, 50mcg/ml</i>	5	B/D
<i>baclofen tabs 10mg, 20mg, 5mg</i>	2	
BOTOX	4	PA
<i>dantrolene sodium caps 100mg, 25mg</i>	1	
DYSPORT	4	PA
GABLOFEN INJ 10000MCG/20ML, 20000MCG/20ML, 40000MCG/20ML	4	B/D
GABLOFEN INJ 50MCG/ML	5	B/D
LIRESAL INTRATHECAL INJ 0.05MG/ML	3	B/D
LIRESAL INTRATHECAL INJ 10MG/20ML	4	B/D
LIRESAL INTRATHECAL INJ 10MG/5ML	5	B/D
MYOBLOC	5	PA
<i>tizanidine hcl caps 4mg</i>	2	
<i>tizanidine hcl tabs 2mg</i>	1	
<i>tizanidine hydrochloride tabs</i>	1	
<i>tizanidine hydrochloride caps</i>	2	
XEOMIN INJ 100UNIT, 50UNIT	4	PA
XEOMIN INJ 200UNIT	5	PA
Antivirals		
Anti-cytomegalovirus (CMV) Agents		
<i>cidofovir</i>	5	
<i>ganciclovir inj 500mg/10ml, 500mg</i>	1	B/D
LIVTENCITY	5	

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PREVYMIS	5	
<i>valganciclovir</i>	2	
<i>valganciclovir hydrochloride</i>	5	
Anti-hepatitis B (HBV) Agents		
<i>adefovir dipivoxil</i>	4	
BARACLUDE SOLN	4	
<i>entecavir</i>	4	
<i>lamivudine tabs 100mg</i>	2	
VEMLIDY	5	
Anti-hepatitis C (HCV) Agents		
EPCLUSA	5	PA
HARVONI	5	PA
LEDIPASVIR/SOFOSBUVIR	5	PA
MAVYRET	5	PA
<i>ribavirin tabs 200mg</i>	2	
SOFOSBUVIR/VELPATASVIR	5	PA
SOVALDI	5	PA
ZEPATIER	5	PA
Anti-HIV Agents, Integrase Inhibitors (INSTI)		
BIKTARVY	5	
CABENUVA	5	
DOVATO	5	
GENVOYA	5	
ISENTRESS HD	5	
ISENTRESS PACK, TABS	5	
ISENTRESS CHEW 25MG	4	
ISENTRESS CHEW 100MG	5	
JULUCA	5	
STRIBILD	5	
TIVICAY PD	5	
TIVICAY TABS 10MG	4	
TIVICAY TABS 25MG, 50MG	5	
VOCABRIA	5	
Anti-HIV Agents, Non-nucleoside Reverse Transcriptase Inhibitors (NNRTI)		
COMPLERA	5	
DELSTRIGO	5	
EDURANT	5	
<i>efavirenz</i>	4	
<i>efavirenz/emtricitabine/tenofovir disoproxil fumarate</i>	4	
<i>efavirenz/lamivudine/tenofovir disoproxil fumarate</i>	5	
<i>etravirine</i>	5	
INTELENCE TABS 25MG	4	
<i>nevirapine</i>	2	

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<i>nevirapine er tb24 400mg</i>	2	
PIFELTRO	5	
Anti-HIV Agents, Nucleoside and Nucleotide Reverse Transcriptase Inhibitors (NRTI)		
<i>abacavir sulfate</i>	2	
<i>abacavir sulfate/lamivudine</i>	4	
<i>abacavir tabs</i>	2	
<i>abacavir soln</i>	4	
CIMDUO	5	
DESCOVY	5	
<i>emtricitabine</i>	4	
<i>emtricitabine/tenofovir disoproxil</i>	5	
<i>emtricitabine/tenofovir disoproxil fumarate tabs 200mg; 300mg</i>	4	
<i>emtricitabine/tenofovir disoproxil fumarate tabs 100mg; 150mg, 133mg; 200mg</i>	5	
EMTRIVA SOLN	4	
<i>lamivudine/zidovudine</i>	4	
<i>lamivudine soln 10mg/ml</i>	2	
<i>lamivudine tabs 150mg, 300mg</i>	2	
ODEFSEY	5	
RETROVIR IV INFUSION	4	
<i>tenofovir disoproxil fumarate</i>	4	
TRIUMEQ	5	
TRIUMEQ PD	4	
TRIZIVIR	5	QL(60 EA per 30 days)
VIREAD POWD	5	
VIREAD TABS 150MG, 200MG, 250MG	5	
<i>zidovudine</i>	1	
Anti-HIV Agents, Other		
FUZEON	5	
<i>maraviroc</i>	5	
RUKOBIA	5	
SELZENTRY SOLN	5	
SELZENTRY TABS 25MG	4	
SELZENTRY TABS 75MG	5	
SUNLENCA	5	
TROGARZO	5	
TYBOST	3	
Anti-HIV Agents, Protease Inhibitors (PI)		
APTIVUS CAPS	5	
<i>atazanavir</i>	4	
<i>atazanavir sulfate</i>	4	
<i>darunavir</i>	5	

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EVOTAZ	5	
<i>fosamprenavir calcium</i>	5	
LEXIVA SUSP	4	
<i>lopinavir/ritonavir</i>	4	
NORVIR PACK	3	
PREZCOBIX	5	
PREZISTA SUSP	5	
PREZISTA TABS 75MG	4	
PREZISTA TABS 150MG	5	
REYATAZ PACK	5	
<i>ritonavir</i>	2	
SYMTUZA	5	
VIRACEPT	5	
Anti-influenza Agents		
<i>amantadine hcl caps, soln, tabs</i>	2	
<i>oseltamivir phosphate caps 75mg</i>	2	QL(110 EA per 365 days)
<i>oseltamivir phosphate caps 30mg</i>	2	QL(168 EA per 365 days)
<i>oseltamivir phosphate caps 45mg</i>	2	QL(84 EA per 365 days)
<i>oseltamivir phosphate susr</i>	2	QL(1080 ML per 365 days)
RELENZA DISKHALER	3	
<i>rimantadine hydrochloride</i>	1	
XOFLUZA TBPK 40MG, 80MG	4	
Antiherpetic Agents		
<i>acyclovir sodium inj 50mg/ml</i>	2	B/D
<i>acyclovir caps 200mg</i>	2	
<i>acyclovir susp 200mg/5ml</i>	2	
<i>acyclovir tabs 400mg, 800mg</i>	2	
<i>famciclovir tabs</i>	2	
<i>valacyclovir hydrochloride</i>	2	
Antiviral, Coronavirus Agents		
LAGEVRIO	4	QL(40 EA per 5 days)
PAXLOVID TBPK 150MG; 100MG	3	QL(20 EA per 5 days); \$0 Copay
PAXLOVID TBPK 150MG; 100MG	3	QL(30 EA per 5 days); \$0 Copay
VEKLURY INJ 100MG	5	
Anxiolytics		
Anxiolytics, Other		
<i>bupirone hcl tabs 15mg</i>	2	
<i>bupirone hydrochloride tabs 10mg, 30mg, 5mg, 7.5mg</i>	2	
<i>meprobamate</i>	4	
Benzodiazepines		
<i>alprazolam er tb24 0.5mg, 1mg</i>	2	QL(120 EA per 30 days)
<i>alprazolam er tb24 2mg, 3mg</i>	2	QL(90 EA per 30 days)
<i>alprazolam odt tbdp 2mg</i>	2	
<i>alprazolam odt tbdp 0.25mg, 0.5mg, 1mg</i>	2	QL(120 EA per 30 days)

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<i>alprazolam xr tb24 0.5mg, 1mg</i>	2	QL(120 EA per 30 days)
<i>alprazolam xr tb24 2mg, 3mg</i>	2	QL(90 EA per 30 days)
<i>alprazolam tabs 0.25mg, 0.5mg, 1mg</i>	2	QL(120 EA per 30 days)
<i>alprazolam tabs 2mg</i>	2	QL(150 EA per 30 days)
<i>chlordiazepoxide hcl caps 10mg, 5mg</i>	2	QL(120 EA per 30 days)
<i>chlordiazepoxide hydrochloride caps 25mg</i>	2	QL(120 EA per 30 days)
<i>clorazepate dipotassium tabs 15mg</i>	2	QL(180 EA per 30 days)
<i>clorazepate dipotassium tabs 7.5mg</i>	2	QL(360 EA per 30 days)
<i>clorazepate dipotassium tabs 3.75mg</i>	2	QL(720 EA per 30 days)
<i>diazepam intensol</i>	2	
<i>diazepam oral soln</i>	2	
<i>diazepam tabs</i>	2	QL(120 EA per 30 days)
<i>diazepam inj 5mg/ml</i>	2	
<i>lorazepam inj 2mg/ml, 4mg/ml</i>	2	
<i>lorazepam tabs 0.5mg</i>	2	QL(120 EA per 30 days)
<i>lorazepam tabs 2mg</i>	2	QL(150 EA per 30 days)
<i>lorazepam tabs 1mg</i>	2	QL(90 EA per 30 days)
<i>midazolam hcl syrup</i>	2	
<i>midazolam hcl inj 10mg/10ml, 10mg/2ml, 2mg/2ml, 50mg/10ml, 5mg/5ml, 5mg/ml</i>	2	
<i>midazolam hydrochloride inj 10mg/10ml, 10mg/2ml, 25mg/5ml, 2mg/2ml, 50mg/10ml, 5mg/5ml, 5mg/ml</i>	2	
<i>oxazepam</i>	2	QL(120 EA per 30 days)
Bipolar Agents		
Mood Stabilizers		
<i>lithium</i>	1	
<i>lithium carbonate er</i>	1	
<i>lithium carbonate caps, tabs</i>	1	
Blood Glucose Regulators		
Antidiabetic Agents		
<i>acarbose tabs</i>	1	
ALOGLIPTIN	4	QL(30 EA per 30 days); ST
ALOGLIPTIN/METFORMIN HCL	4	QL(60 EA per 30 days); ST
ALOGLIPTIN/METFORMIN HYDROCHLORIDE	4	QL(60 EA per 30 days); ST
ALOGLIPTIN/PIOGLITAZONE TABS 12.5MG; 30MG, 25MG; 15MG, 25MG; 30MG, 25MG; 45MG	4	QL(30 EA per 30 days); ST
<i>glimepiride tabs 1mg, 2mg, 4mg</i>	1	
<i>glipizide er</i>	1	
<i>glipizide xl</i>	1	
<i>glipizide/metformin hydrochloride</i>	2	
GLIPIZIDE TABS 2.5MG	1	
<i>glipizide tabs 10mg, 5mg</i>	1	
GLYXAMBI	3	
JANUMET	3	ST

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JANUMET XR	3	ST
JANUVIA	3	ST
JENTADUETO	3	QL(60 EA per 30 days); ST
JENTADUETO XR TB24 5MG; 1000MG	3	QL(30 EA per 30 days); ST
JENTADUETO XR TB24 2.5MG; 1000MG	3	QL(60 EA per 30 days); ST
<i>metformin hydrochloride er tb24 500mg, 750mg</i>	1	
<i>metformin hydrochloride soln</i>	1	
<i>metformin hydrochloride tabs 1000mg, 500mg, 850mg</i>	1	
<i>miglitol</i>	2	
MOUNJARO	3	PA
<i>nateglinide</i>	2	
NESINA	4	QL(30 EA per 30 days); ST
OSENI TABS 12.5MG; 30MG, 25MG; 15MG, 25MG; 30MG, 25MG; 45MG	4	QL(30 EA per 30 days); ST
OZEMPIC INJ 2MG/3ML, 4MG/3ML, 8MG/3ML	3	PA
<i>pioglitazone hcl-glimepiride</i>	2	
<i>pioglitazone hcl/metformin hcl</i>	2	
<i>pioglitazone hcl tabs 45mg</i>	2	
<i>pioglitazone hydrochloride tabs 15mg, 30mg</i>	2	
<i>repaglinide</i>	2	
RYBELSUS	3	PA
SYMLINPEN 120	5	PA
SYMLINPEN 60	5	PA
SYNJARDY	3	
SYNJARDY XR	3	
TRADJENTA	3	QL(30 EA per 30 days); ST
TRIJARDY XR	3	
TRULICITY	3	PA
XIGDUO XR	3	
XULTOPHY 100/3.6	4	ST
Glycemic Agents		
<i>diazoxide susp</i>	5	
GLUCAGEN HYPOKIT	3	
GLUCAGON EMERGENCY KIT	3	
GLUCAGON EMERGENCY KIT FOR LOW BLOOD SUGAR	3	
GVOKE HYPOPEN 2-PACK	4	
GVOKE KIT	4	
GVOKE PFS INJ 1MG/0.2ML	4	
Insulins		
HUMALOG	3	QL(60 ML per 30 days)
HUMALOG JUNIOR KWIKPEN	3	QL(60 ML per 30 days)
HUMALOG KWIKPEN	3	QL(60 ML per 30 days)
HUMALOG MIX 50/50	3	QL(60 ML per 30 days)

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HUMALOG MIX 50/50 KWIKPEN	3	QL(60 ML per 30 days)
HUMALOG MIX 75/25	3	QL(60 ML per 30 days)
HUMALOG MIX 75/25 KWIKPEN	3	QL(60 ML per 30 days)
<i>humulin 70/30</i>	2	QL(60 ML per 30 days)
HUMULIN 70/30 KWIKPEN	3	QL(60 ML per 30 days)
<i>humulin n</i>	2	QL(60 ML per 30 days)
HUMULIN N KWIKPEN	3	QL(60 ML per 30 days)
<i>humulin r</i>	2	QL(60 ML per 30 days)
HUMULIN R U-500 (CONCENTRATED)	3	QL(60 ML per 30 days)
HUMULIN R U-500 KWIKPEN	3	QL(60 ML per 30 days)
LANTUS	3	QL(60 ML per 30 days)
LANTUS SOLOSTAR	3	QL(60 ML per 30 days)
NOVOLOG	4	QL(60 ML per 30 days); ST
NOVOLOG FLEXPEN	4	QL(60 ML per 30 days); ST
NOVOLOG FLEXPEN RELION	4	QL(60 ML per 30 days); ST
NOVOLOG MIX 70/30	4	QL(60 ML per 30 days); ST
NOVOLOG MIX 70/30 PREFILLED FLEXPEN	4	QL(60 ML per 30 days); ST
NOVOLOG MIX 70/30 PREFILLED FLEXPEN RELION	4	QL(60 ML per 30 days); ST
NOVOLOG MIX 70/30 RELION	4	QL(60 ML per 30 days); ST
NOVOLOG PENFILL	4	QL(60 ML per 30 days); ST
NOVOLOG RELION	4	QL(60 ML per 30 days); ST
TOUJEO MAX SOLOSTAR	3	QL(27 ML per 30 days)
TOUJEO SOLOSTAR	3	QL(27 ML per 30 days)
TRESIBA	3	QL(54 ML per 30 days)
TRESIBA FLEXTOUCH	3	QL(54 ML per 30 days)
Blood Products and Modifiers		
<i>Anticoagulants</i>		
<i>dabigatran etexilate caps 110mg</i>	2	
<i>dabigatran etexilate caps 150mg, 75mg</i>	4	
ELIQUIS STARTER PACK	3	QL(148 EA per 365 days)
ELIQUIS TABS 2.5MG	3	QL(60 EA per 30 days)
ELIQUIS TABS 5MG	3	QL(90 EA per 30 days)
<i>enoxaparin sodium</i>	4	
<i>fondaparinux sodium inj 2.5mg/0.5ml</i>	4	
<i>fondaparinux sodium inj 10mg/0.8ml, 5mg/0.4ml, 7.5mg/0.6ml</i>	5	
FRAGMIN INJ 10000UNIT/4ML, 2500UNIT/0.2ML	4	
FRAGMIN INJ 10000UNIT/ML, 12500UNIT/0.5ML, 15000UNIT/0.6ML, 18000UNT/0.72ML, 5000UNIT/0.2ML, 7500UNIT/0.3ML, 95000UNIT/3.8ML	5	
<i>heparin sodium/d5w inj 5%; 100unit/ml, 5%; 25000unit/500ml, 5%; 40unit/ml</i>	2	
<i>heparin sodium/dextrose inj 5%; 25000unit/250ml, 5%; 25000unit/500ml</i>	2	
<i>heparin sodium/nacl 0.45% inj 25000unit/250ml; 0.45%</i>	2	

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<i>heparin sodium/sodium chloride 0.9% premix inj 1000unit/500ml; 0.9%</i>	2	
<i>heparin sodium/sodium chloride 0.9% inj 1000unit/500ml; 0.9%</i>	2	
<i>heparin sodium/sodium chloride inj 25000unit/250ml; 0.45%, 25000unit/500ml; 0.45%</i>	2	
<i>heparin sodium inj 10000unit/ml, 1000unit/ml, 20000unit/ml, 5000unit/ml</i>	2	
<i>jantoven</i>	1	
<i>warfarin sodium tabs</i>	1	
XARELTO STARTER PACK	3	
XARELTO TABS	3	
XARELTO SUSR	5	
Blood Products and Modifiers, Other		
<i>anagrelide hydrochloride</i>	2	
ARANESP ALBUMIN FREE INJ 10MCG/0.4ML, 25MCG/0.42ML, 25MCG/ML, 40MCG/0.4ML, 40MCG/ML, 60MCG/ML	4	PA
ARANESP ALBUMIN FREE INJ 100MCG/0.5ML, 100MCG/ML, 150MCG/0.3ML, 200MCG/0.4ML, 200MCG/ML, 300MCG/0.6ML, 500MCG/ML, 60MCG/0.3ML	5	PA
EPOGEN INJ 10000UNIT/ML, 20000UNIT/ML, 2000UNIT/ML, 3000UNIT/ML, 4000UNIT/ML	4	PA
FULPHILA	5	
FYLNETRA	5	
GRANIX	5	
MOZOBIL	5	PA
MULPLETA	5	PA
NEULASTA	5	
NEULASTA ONPRO KIT	5	
NEUPOGEN	5	
NIVESTYM	5	
NPLATE	5	PA
NYVEPRIA	5	
PLERIXAFOR	5	PA
PROCRIT INJ 10000UNIT/ML, 2000UNIT/ML, 3000UNIT/ML, 4000UNIT/ML	4	PA
PROCRIT INJ 20000UNIT/ML, 40000UNIT/ML	5	PA
PROMACTA	5	PA
REBLOZYL	5	PA
RETACRIT INJ 10000UNIT/ML, 20000UNIT/2ML, 20000UNIT/ML, 2000UNIT/ML, 3000UNIT/ML, 4000UNIT/ML	4	PA

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RETACRIT INJ 40000UNIT/ML	5	PA
STIMUFEND	5	
UDENYCA	5	
UDENYCA ONBODY	5	
ZIEXTENZO	5	
Hemostasis Agents		
<i>aminocaproic acid inj</i>	1	
<i>aminocaproic acid tabs</i>	2	
<i>tranexamic acid inj, tabs</i>	2	
Platelet Modifying Agents		
<i>aspirin/dipyridamole</i>	2	
<i>aspirin/dipyridamole er</i>	2	
BRILINTA	3	
CABLIVI	5	PA
<i>cilostazol</i>	1	
<i>clopidogrel</i>	1	
DOPTELET	5	PA
<i>prasugrel hydrochloride</i>	2	
Cardiovascular Agents		
Alpha-adrenergic Agonists		
<i>clonidine hydrochloride tabs 0.1mg, 0.2mg, 0.3mg</i>	1	
<i>clonidine ptwk 0.1mg/24hr</i>	2	
<i>droxidopa</i>	5	
<i>midodrine hcl</i>	2	
Alpha-adrenergic Blocking Agents		
<i>phenoxybenzamine hydrochloride</i>	5	
<i>phentolamine mesylate inj 5mg</i>	1	
<i>prazosin hydrochloride caps</i>	2	
Angiotensin II Receptor Antagonists		
<i>candesartan cilexetil</i>	2	
<i>irbesartan</i>	1	
<i>losartan potassium tabs</i>	1	
<i>olmesartan medoxomil tabs</i>	2	
<i>telmisartan</i>	2	
<i>valsartan tabs</i>	2	
Angiotensin-converting Enzyme (ACE) Inhibitors		
<i>benazepril hcl tabs 10mg, 40mg, 5mg</i>	1	
<i>benazepril hydrochloride tabs 20mg</i>	1	
<i>captopril tabs</i>	2	
<i>enalapril maleate tabs</i>	1	
<i>enalapril maleate soln</i>	4	
<i>enalaprilat</i>	1	
<i>fosinopril sodium</i>	1	
<i>lisinopril tabs</i>	1	

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<i>moexipril hcl</i>	1	
<i>perindopril erbumine</i>	1	
<i>quinapril hydrochloride</i>	1	
<i>ramipril</i>	1	
<i>trandolapril</i>	1	
Antiarrhythmics		
<i>amiodarone hcl inj 50mg/ml, 900mg/18ml</i>	1	
AMIODARONE HYDROCHLORIDE INJ 900MG/18ML	1	
<i>amiodarone hydrochloride inj 450mg/9ml</i>	1	
<i>amiodarone hydrochloride tabs 200mg</i>	1	
<i>amiodarone hydrochloride tabs 100mg</i>	2	
DIGOXIN SOLN	3	
<i>digoxin tabs 125mcg</i>	1	
<i>digoxin tabs 250mcg</i>	2	
<i>digox tabs 125mcg</i>	1	
<i>digox tabs 250mcg</i>	2	
<i>dofetilide</i>	2	
<i>flecainide acetate</i>	2	
LANOXIN PEDIATRIC	4	
<i>lidocaine hcl in d5w inj 5%; 4mg/ml, 5%; 8mg/ml</i>	2	
<i>lidocaine hcl/dextrose inj 5%; 4mg/ml, 5%; 8mg/ml</i>	2	
<i>lidocaine hcl inj 100mg/5ml, 50mg/5ml</i>	1	
<i>mexiletine hcl</i>	2	
MULTAQ	4	
NEXTERONE INJ 150MG/100ML; 42.1MG/ML	3	
NEXTERONE INJ 360MG/200ML; 41.4MG/ML	5	
<i>procainamide hcl inj 100mg/ml</i>	1	
<i>procainamide hydrochloride</i>	1	
<i>propafenone hcl</i>	2	
<i>propafenone hydrochloride er</i>	2	
<i>propafenone hydrochloride tabs 300mg</i>	2	
<i>quinidine gluconate cr</i>	2	
<i>quinidine gluconate er</i>	2	
<i>quinidine sulfate tabs</i>	2	
<i>sorine tabs 120mg, 160mg, 80mg</i>	1	
<i>sotalol hcl</i>	1	
<i>sotalol hcl (af) tabs 80mg</i>	1	
<i>sotalol hcl af</i>	1	
<i>sotalol hydrochloride (af)</i>	1	
<i>sotalol hydrochloride tabs 120mg, 160mg, 80mg</i>	1	
SOTYLIZE	4	
Beta-adrenergic Blocking Agents		
<i>acebutolol hydrochloride</i>	1	
<i>atenolol tabs</i>	1	

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<i>betaxolol hcl tabs 10mg, 20mg</i>	4	
<i>bisoprolol fumarate</i>	1	
<i>carvedilol</i>	1	
<i>carvedilol phosphate er</i>	4	
<i>esmolol hcl inj 100mg/10ml</i>	1	
<i>esmolol hydrochloride in sodium chloride</i>	2	
<i>esmolol hydrochloride in sodium chloride double strength</i>	2	
<i>esmolol hydrochloride/sodium chloride inj 2000mg/100ml; 4.1mg/ml, 2500mg/250ml; 5.9mg/ml</i>	2	
HEMANGEOL	4	
KAPSPARGO SPRINKLE	4	
<i>labetalol hydrochloride tabs</i>	1	
<i>labetalol hydrochloride inj 5mg/ml</i>	1	
<i>metoprolol succinate er</i>	1	
<i>metoprolol tartrate tabs</i>	1	
<i>metoprolol tartrate inj 5mg/5ml</i>	1	
<i>nadolol tabs 20mg, 40mg, 80mg</i>	2	
<i>nebivolol hydrochloride</i>	2	
<i>nebivolol tabs 5mg</i>	2	
<i>pindolol tabs</i>	2	
<i>propranolol hcl er cp24 120mg, 160mg</i>	2	
<i>propranolol hcl inj, oral soln</i>	1	
<i>propranolol hcl tabs 40mg</i>	1	
<i>propranolol hydrochloride er cp24 60mg, 80mg</i>	2	
<i>propranolol hydrochloride tabs 10mg, 20mg, 60mg, 80mg</i>	1	
Calcium Channel Blocking Agents, Dihydropyridines		
<i>amlodipine besylate tabs</i>	1	
<i>felodipine er</i>	2	
<i>isradipine</i>	2	
<i>nicardipine hcl caps 20mg</i>	2	
<i>nicardipine hcl caps 30mg</i>	4	
NICARDIPINE HYDROCHLORIDE/SODIUM CHLORIDE INJ 40MG/200ML; 0.9%	3	
NICARDIPINE HYDROCHLORIDE INJ 20MG/200ML; 0.9%	3	
<i>nicardipine hydrochloride inj 2.5mg/ml</i>	2	
<i>nifedipine er</i>	1	
<i>nimodipine caps</i>	4	
Calcium Channel Blocking Agents, Nondihydropyridines		
<i>cartia xt</i>	2	
<i>dilt-xr</i>	1	
<i>diltiazem hcl cd</i>	2	
<i>diltiazem hcl er cp12 90mg</i>	1	
<i>diltiazem hcl er cp24 120mg, 180mg, 240mg, 420mg</i>	2	

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<i>diltiazem hcl er tb24</i>	2	
<i>diltiazem hcl inj 100mg, 125mg/25ml, 50mg/10ml</i>	1	
<i>diltiazem hcl tabs 30mg, 60mg, 90mg</i>	1	
<i>diltiazem hydrochloride er cp24 120mg, 180mg, 240mg</i>	1	
<i>diltiazem hydrochloride er cp24 120mg, 180mg, 240mg, 300mg, 360mg</i>	2	
<i>diltiazem hydrochloride er tb24 120mg, 180mg, 240mg, 300mg, 360mg</i>	2	
<i>diltiazem hydrochloride inj 25mg/5ml</i>	1	
<i>diltiazem hydrochloride tabs 120mg</i>	1	
<i>taztia xt</i>	2	
<i>tiadylt er</i>	2	
<i>verapamil hcl er cp24 100mg, 300mg</i>	2	
<i>verapamil hcl er cp24 120mg, 180mg, 240mg</i>	4	
<i>verapamil hcl er tbcr 120mg, 240mg</i>	1	
<i>verapamil hcl sr cp24 360mg</i>	2	
<i>verapamil hcl sr cp24 120mg, 180mg, 240mg</i>	4	
<i>verapamil hcl tabs 40mg, 80mg</i>	1	
<i>verapamil hydrochloride er cp24 200mg</i>	2	
<i>verapamil hydrochloride er tbcr 180mg</i>	1	
<i>verapamil hydrochloride inj</i>	1	
<i>verapamil hydrochloride tabs 120mg</i>	1	
Cardiovascular Agents, Other		
<i>acetazolamide sodium</i>	5	
<i>aliskiren</i>	4	
<i>amiloride/hydrochlorothiazide</i>	1	
<i>amlodipine besylate/benazepril hcl caps 10mg; 40mg</i>	1	
<i>amlodipine besylate/benazepril hydrochloride</i>	1	
<i>amlodipine besylate/valsartan</i>	2	
<i>atenolol/chlorthalidone</i>	1	
<i>benazepril hydrochloride/hydrochlorothiazide</i>	1	
<i>bisoprolol fumarate/hydrochlorothiazide</i>	1	
<i>candesartan cilexetil/hydrochlorothiazide</i>	2	
CORLANOR TABS	4	
CORLANOR SOLN	4	
<i>dobutamine hcl/d5w inj 5%; 1mg/ml</i>	1	B/D
<i>dobutamine hcl inj 250mg/20ml</i>	1	B/D
<i>dobutamine hydrochloride/dextrose 5%</i>	1	B/D
<i>dopamine hydrochloride</i>	1	B/D
<i>dopamine hydrochloride/dextrose</i>	1	B/D
<i>dopamine/d5w inj 5%; 3.2mg/ml</i>	1	B/D
<i>enalapril maleate/hydrochlorothiazide</i>	1	
ENTRESTO CPSP	3	
ENTRESTO TABS	3	QL(60 EA per 30 days)

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<i>fosinopril sodium/hydrochlorothiazide</i>	2	
<i>irbesartan/hydrochlorothiazide</i>	1	
<i>isosorbide dinitrate/hydralazine hydrochloride</i>	4	
<i>ivabradine hydrochloride</i>	4	
<i>lisinopril/hydrochlorothiazide</i>	1	
<i>losartan potassium/hydrochlorothiazide</i>	1	
<i>metoprolol/hydrochlorothiazide</i>	1	
<i>metyrosine</i>	5	
<i>milrinone lactate in dextrose</i>	1	B/D
<i>norepinephrine bitartrate inj 1mg/ml</i>	2	
<i>olmesartan medoxomil/hydrochlorothiazide</i>	2	
<i>pentoxifylline er</i>	1	
QUINAPRIL/HYDROCHLOROTHIAZIDE TABS 25MG; 20MG	1	
<i>quinapril/hydrochlorothiazide tabs 12.5mg; 10mg, 12.5mg; 20mg</i>	1	
<i>ranolazine er</i>	2	
<i>spironolactone/hydrochlorothiazide</i>	1	
<i>telmisartan/hydrochlorothiazide</i>	2	
<i>trandolapril/verapamil hcl er</i>	2	
<i>triamterene/hydrochlorothiazide caps 25mg; 37.5mg</i>	1	
<i>triamterene/hydrochlorothiazide tabs</i>	1	
<i>valsartan/hydrochlorothiazide</i>	1	
VYNDAMAX	5	PA
Diuretics, Loop		
<i>bumetanide inj, tabs</i>	2	
<i>ethacrynate sodium</i>	5	
<i>furosemide inj, oral soln, tabs</i>	1	
<i>toremide tabs</i>	1	
Diuretics, Potassium-sparing		
<i>amiloride hcl tabs</i>	1	
<i>triamterene caps</i>	4	
Diuretics, Thiazide		
<i>chlorothiazide sodium</i>	1	
<i>chlorthalidone tabs 25mg, 50mg</i>	1	
DIURIL SUSP	4	
<i>hydrochlorothiazide caps, tabs</i>	1	
<i>indapamide tabs</i>	1	
<i>metolazone</i>	2	
Dyslipidemics, Fibric Acid Derivatives		
<i>fenofibrate micronized caps 134mg, 200mg, 67mg</i>	2	
<i>fenofibrate caps 200mg, 43mg, 67mg</i>	2	
<i>fenofibrate tabs 120mg, 145mg, 160mg, 48mg, 54mg</i>	2	
<i>fenofibric acid</i>	2	

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<i>fenofibric acid dr</i>	2	
<i>gemfibrozil tabs</i>	2	
<i>Dyslipidemics, HMG CoA Reductase Inhibitors</i>		
<i>atorvastatin calcium</i>	1	
<i>lovastatin tabs</i>	1	
<i>pravastatin sodium</i>	1	
<i>rosuvastatin calcium tabs</i>	2	
<i>simvastatin tabs</i>	1	
<i>Dyslipidemics, Other</i>		
<i>cholestyramine light</i>	2	
<i>cholestyramine pack, powd</i>	2	
<i>colesevelam hydrochloride pack</i>	2	
<i>colestipol hcl gran, tabs</i>	2	
<i>ezetimibe</i>	2	
<i>icosapent ethyl</i>	4	
JUXTAPID CAPS 10MG, 20MG, 30MG, 5MG	5	PA
<i>niacin er</i>	4	
<i>niacin tabs 500mg</i>	2	
<i>niacor</i>	2	
<i>omega-3-acid ethyl esters</i>	4	
PRALUENT	3	QL(2 ML per 28 days)
<i>prevalite</i>	2	
REPATHA	3	QL(3 ML per 28 days)
REPATHA PUSHTRONEX SYSTEM	3	QL(3.5 ML per 28 days)
REPATHA SURECLICK	3	QL(3 ML per 28 days)
<i>Mineralocorticoid Receptor Antagonists</i>		
<i>eplerenone</i>	2	
KERENDIA	4	QL(30 EA per 30 days); PA
<i>spironolactone tabs</i>	1	
<i>Sodium-Glucose Co-Transporter 2 Inhibitors (SGLT2i)</i>		
FARXIGA	3	
JARDIANCE	3	
<i>Vasodilators, Direct-acting Arterial/Venous</i>		
<i>isosorbide dinitrate tabs 10mg, 20mg, 30mg, 5mg</i>	1	
<i>isosorbide mononitrate</i>	1	
<i>isosorbide mononitrate er</i>	1	
NITRO-BID	3	
<i>nitroglycerin in dextrose 5%</i>	2	
<i>nitroglycerin transdermal</i>	1	
<i>nitroglycerin inj 5mg/ml</i>	2	
<i>nitroglycerin translingual soln 0.4mg/spray</i>	2	
<i>nitroglycerin subl 0.3mg, 0.4mg, 0.6mg</i>	2	
VERQUVO	3	QL(30 EA per 30 days); PA
<i>Vasodilators, Direct-acting Arterial</i>		

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<i>hydralazine hcl inj</i>	1	
<i>hydralazine hcl tabs 10mg</i>	1	
<i>hydralazine hydrochloride tabs 100mg, 25mg, 50mg</i>	1	
<i>minoxidil tabs</i>	1	
Central Nervous System Agents		
Attention Deficit Hyperactivity Disorder Agents, Amphetamines		
<i>amphetamine/dextroamphetamine cp24</i>	2	QL(120 EA per 30 days)
<i>amphetamine/dextroamphetamine tabs</i>	2	QL(60 EA per 30 days)
<i>dextroamphetamine sulfate er</i>	4	QL(180 EA per 30 days)
<i>dextroamphetamine sulfate soln</i>	4	QL(1800 ML per 30 days)
<i>dextroamphetamine sulfate tabs 10mg, 5mg</i>	2	QL(180 EA per 30 days)
Attention Deficit Hyperactivity Disorder Agents, Non-amphetamines		
<i>atomoxetine hydrochloride caps 10mg, 25mg, 40mg, 60mg, 80mg</i>	2	
<i>atomoxetine caps 100mg, 18mg, 40mg, 60mg, 80mg</i>	2	
<i>clonidine hydrochloride er</i>	2	
<i>clonidine hydrochloride tb12 0.1mg</i>	2	
<i>dexmethylphenidate hcl er cp24 15mg, 20mg, 30mg, 35mg</i>	4	QL(30 EA per 30 days)
<i>dexmethylphenidate hcl tabs 10mg, 5mg</i>	2	QL(60 EA per 30 days)
<i>dexmethylphenidate hydrochloride er cp24 10mg, 15mg, 30mg, 40mg, 5mg</i>	4	QL(30 EA per 30 days)
<i>dexmethylphenidate hydrochloride cp24</i>	4	QL(30 EA per 30 days)
<i>dexmethylphenidate hydrochloride tabs 2.5mg</i>	2	QL(60 EA per 30 days)
<i>methylphenidate hydrochloride cd cpcr 10mg, 20mg, 30mg, 50mg, 60mg</i>	4	QL(30 EA per 30 days)
<i>methylphenidate hydrochloride er cp24 10mg, 20mg, 30mg, 40mg</i>	4	QL(30 EA per 30 days)
<i>methylphenidate hydrochloride er cpcr 20mg, 30mg, 40mg, 50mg</i>	4	QL(30 EA per 30 days)
<i>methylphenidate hydrochloride er tb24 18mg</i>	4	QL(30 EA per 30 days)
<i>methylphenidate hydrochloride er tbcr 10mg, 20mg</i>	2	QL(90 EA per 30 days)
<i>methylphenidate hydrochloride er tbcr 27mg, 36mg, 54mg, 72mg</i>	4	QL(30 EA per 30 days)
<i>methylphenidate hydrochloride er tbcr 18mg</i>	4	QL(90 EA per 30 days)
<i>methylphenidate hydrochloride chew 10mg</i>	4	QL(180 EA per 30 days)
<i>methylphenidate hydrochloride chew 2.5mg, 5mg</i>	4	QL(90 EA per 30 days)
<i>methylphenidate hydrochloride tabs</i>	2	QL(90 EA per 30 days)
<i>methylphenidate hydrochloride soln</i>	2	QL(900 ML per 30 days)
Central Nervous System, Other		
<i>butalbital/acetaminophen/caffeine caps</i>	2	
<i>butalbital/acetaminophen/caffeine tabs 325mg; 50mg; 40mg</i>	2	
<i>butalbital/aspirin/caffeine caps</i>	2	
<i>caffeine citrate inj</i>	2	

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<i>caffeine citrate oral soln 20mg/ml</i>	2	
EXSERVAN	5	
INGREZZA	5	PA
NUEDEXTA	5	PA
<i>riluzole</i>	4	
<i>tetrabenazine tabs 12.5mg</i>	4	PA
<i>tetrabenazine tabs 25mg</i>	5	PA
VEOZAH	4	QL(30 EA per 30 days); PA
<i>Fibromyalgia Agents</i>		
SAVELLA	3	PA NSO
SAVELLA TITRATION PACK	3	PA NSO
<i>Multiple Sclerosis Agents</i>		
AVONEX PEN	5	
AVONEX INJ 30MCG/0.5ML	5	
BETASERON	5	
<i>dalfampridine er</i>	3	PA
<i>dimethyl fumarate</i>	4	QL(60 EA per 30 days)
<i>dimethyl fumarate starterpack</i>	5	QL(120 EA per 365 days)
EXTAVIA	5	
<i>fingolimod hydrochloride</i>	5	
GILENYA CAPS 0.25MG	5	
<i>glatiramer acetate</i>	5	
<i>glatopa</i>	5	
MAVENCLAD	5	PA
MAYZENT STARTER PACK TBPk 0.25MG	4	QL(14 EA per 365 days)
MAYZENT STARTER PACK TBPk 0.25MG	5	QL(24 EA per 365 days)
MAYZENT TABS 0.25MG	5	QL(120 EA per 30 days)
MAYZENT TABS 1MG, 2MG	5	QL(30 EA per 30 days)
<i>mitoxantrone hcl inj 2mg/ml</i>	2	
PLEGRIDY	5	
PLEGRIDY STARTER PACK	5	
REBIF	5	
REBIF REBIDOSE	5	
REBIF REBIDOSE TITRATION PACK	5	
REBIF TITRATION PACK	5	
<i>teriflunomide</i>	5	
TYSABRI	5	PA
VUMERITY	5	
ZEPOSIA	5	PA
ZEPOSIA 7-DAY STARTER PACK	5	PA
ZEPOSIA STARTER KIT	5	PA
Dental and Oral Agents		
<i>Dental and Oral Agents</i>		
<i>cevimeline hydrochloride</i>	2	

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<i>chlorhexidine gluconate soln</i>	1	
<i>doxycycline hyclate tabs 20mg</i>	2	
KEPIVANCE INJ 5.16MG	5	PA
<i>kourzeq</i>	2	
<i>lidocaine hcl viscous</i>	1	
<i>lidocaine hcl mouth/throat soln 4%</i>	1	
<i>lidocaine hydrochloride viscous</i>	1	
<i>lidocaine viscous</i>	1	
<i>oralone dental paste</i>	2	
<i>periogard</i>	1	
<i>pilocarpine hydrochloride</i>	2	
<i>triamcinolone acetonide dental paste</i>	2	
Dermatological Agents		
Acne and Rosacea Agents		
<i>accutane</i>	4	
<i>acitretin</i>	4	
<i>adapalene gel 0.1%</i>	2	
<i>amnesteem</i>	4	
<i>azelaic acid</i>	2	
AZELEX	4	PA
<i>claravis</i>	4	
<i>isotretinoin caps 10mg, 20mg, 30mg, 40mg</i>	4	
<i>isotretinoin caps 25mg, 35mg</i>	5	
<i>metronidazole crea 0.75%</i>	2	
<i>metronidazole gel 0.75%, 1%</i>	2	
<i>metronidazole lotn 0.75%</i>	2	
<i>tazarotene crea 0.05%</i>	4	PA
<i>tazarotene crea 0.1%</i>	4	PA
<i>tazarotene gel</i>	4	PA
<i>tretinoin crea 0.025%</i>	2	PA
<i>tretinoin crea 0.05%, 0.1%</i>	4	PA
<i>tretinoin gel 0.05%</i>	2	PA
<i>tretinoin gel 0.01%, 0.025%</i>	4	PA
<i>zenatane</i>	4	
Dermatitis and Pruritus Agents		
ADBRY INJ 300MG/2ML	5	PA
<i>ala-cort</i>	1	
<i>alclometasone dipropionate</i>	1	
<i>amcinonide oint</i>	1	
<i>ammonium lactate lotn</i>	1	QL(400 GM per 30 days)
<i>betamethasone dipropionate augmented</i>	2	
<i>betamethasone dipropionate crea, lotn, oint</i>	2	
<i>betamethasone valerate crea, lotn, oint</i>	2	
<i>clobetasol propionate e</i>	2	

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<i>clobetasol propionate emollient crea</i>	2	
<i>clobetasol propionate emollient foam</i>	4	
<i>clobetasol propionate foam 0.05%</i>	2	
<i>clobetasol propionate foam 0.05%</i>	4	
<i>clobetasol propionate crea, gel, oint, soln</i>	2	
<i>desonide crea, lotn, oint</i>	2	
<i>desoximetasone crea 0.25%</i>	2	
<i>desoximetasone crea 0.05%</i>	4	QL(15 GM per 30 days)
DOXEPIN HYDROCHLORIDE CREA 5%	3	QL(90 GM per 30 days)
<i>fluocinolone acetonide body</i>	2	
<i>fluocinolone acetonide scalp</i>	2	
<i>fluocinolone acetonide topical</i>	2	
<i>fluocinolone acetonide crea 0.01%, 0.025%</i>	2	
<i>fluocinolone acetonide oint 0.025%</i>	2	
<i>fluocinolone acetonide soln 0.01%</i>	2	
<i>fluocinonide crea 0.05%</i>	4	
<i>fluocinonide crea 0.1%</i>	4	QL(30 GM per 30 days)
<i>fluocinonide soln</i>	2	
<i>fluocinonide gel, oint</i>	4	
<i>fluticasone propionate crea 0.05%</i>	1	
<i>fluticasone propionate oint 0.005%</i>	1	
<i>halobetasol propionate crea, oint</i>	2	
<i>hydrocortisone butyrate (lipid)</i>	1	
<i>hydrocortisone butyrate (lipophilic)</i>	1	
<i>hydrocortisone butyrate crea, oint, soln</i>	1	
<i>hydrocortisone crea 1%, 2.5%</i>	1	
<i>hydrocortisone lotn 2.5%</i>	1	
<i>hydrocortisone oint 1%, 2.5%</i>	1	
<i>mometasone furoate</i>	1	
<i>pimecrolimus</i>	4	
<i>selenium sulfide</i>	1	
<i>tacrolimus oint 0.03%</i>	2	
<i>tacrolimus oint 0.1%</i>	2	QL(30 GM per 30 days)
<i>triamcinolone acetonide aers, crea, lotn</i>	1	
<i>triamcinolone acetonide oint 0.025%, 0.1%, 0.5%</i>	1	
<i>triderm</i>	1	
Dermatological Agents, Other		
<i>calcipotriene soln</i>	2	
<i>calcipotriene crea, oint</i>	4	
<i>calcitriol oint 3mcg/gm</i>	2	
<i>clotrimazole/betamethasone dipropionate</i>	2	
<i>diclofenac sodium gel 3%</i>	4	QL(100 GM per 30 days)
FLUOROURACIL CREA 0.5%	5	QL(30 GM per 30 days)
<i>fluorouracil crea 5%</i>	2	

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Drug Name	Drug Tier	Requirements/Limits
<i>fluorouracil external soln 2%, 5%</i>	2	
<i>imiquimod crea 5%</i>	2	
<i>methoxsalen caps</i>	5	
<i>nystatin/triamcinolone</i>	2	
<i>nystatin/triamcinolone acetone oint</i>	2	
OTEZLA TABS 20MG, 30MG	5	PA
<i>podofilox soln</i>	1	
REGRANEX	5	PA
SANTYL	4	
<i>silver sulfadiazine</i>	1	
<i>ssd</i>	1	
<i>Pediculicides/Scabicides</i>		
<i>ivermectin crea 1%</i>	4	QL(45 GM per 30 days)
<i>malathion</i>	1	
<i>permethrin crea</i>	2	
<i>Topical Anti-infectives</i>		
<i>acyclovir oint 5%</i>	4	
<i>ciclodan soln</i>	2	
<i>ciclopirox nail lacquer</i>	2	
<i>ciclopirox olamine</i>	2	
<i>ciclopirox gel, sham, susp</i>	2	
<i>clindacin</i>	2	
<i>clindamycin phosphate gel 1%</i>	2	
<i>clindamycin phosphate lotn 1%</i>	2	QL(60 ML per 30 days)
<i>clindamycin phosphate external soln 1%</i>	2	
<i>ery</i>	2	
<i>erythromycin gel 2%</i>	2	
<i>erythromycin soln 2%</i>	2	
<i>mupirocin oint</i>	2	
SULFAMYLON CREA	4	
Electrolytes/Minerals/Metals/Vitamins		
<i>Electrolyte/Mineral Replacement</i>		
AMINOSYN II INJ 107.6MEQ/L; 1490MG/100ML; 1527MG/100ML; 1050MG/100ML; 1107MG/100ML; 750MG/100ML; 450MG/100ML; 990MG/100ML; 1500MG/100ML; 1575MG/100ML; 258MG/100ML; 405MG/100ML; 447MG/100ML; 1083MG/100ML; 795MG/100ML; 50MEQ/L; 600MG/100ML; 300MG/100ML; 750MG/100ML, 993MG/100ML; 1018MG/100ML; 700MG/100ML; 738MG/100ML; 500MG/100ML; 300MG/100ML; 660MG/100ML; 1000MG/100ML; 1050MG/100ML; 172MG/100ML; 270MG/100ML; 298MG/100ML; 722MG/100ML; 530MG/100ML; 400MG/100ML; 200MG/100ML; 500MG/100ML	3	B/D

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Drug Name	Drug Tier	Requirements/Limits
AMINOSYN-PF 7% INJ 32.5MEQ/L; 490MG/100ML; 861MG/100ML; 370MG/100ML; 576MG/100ML; 270MG/100ML; 220MG/100ML; 534MG/100ML; 831MG/100ML; 475MG/100ML; 125MG/100ML; 300MG/100ML; 570MG/100ML; 347MG/100ML; 50MG/100ML; 360MG/100ML; 125MG/100ML; 44MG/100ML; 452MG/100ML	3	B/D
AMINOSYN-PF INJ 46MEQ/L; 698MG/100ML; 1227MG/100ML; 527MG/100ML; 820MG/100ML; 385MG/100ML; 312MG/100ML; 760MG/100ML; 1200MG/100ML; 677MG/100ML; 180MG/100ML; 427MG/100ML; 812MG/100ML; 495MG/100ML; 70MG/100ML; 512MG/100ML; 180MG/100ML; 44MG/100ML; 673MG/100ML	3	B/D
<i>carglumic acid</i>	5	PA
CLINIMIX 4.25%/DEXTROSE 10%	3	B/D
CLINIMIX 4.25%/DEXTROSE 5%	3	B/D
CLINIMIX 5%/DEXTROSE 15%	3	B/D
CLINIMIX 5%/DEXTROSE 20%	3	B/D
CLINIMIX 6/5	3	B/D
CLINIMIX 8/10	3	B/D
CLINIMIX 8/14	3	B/D
CLINIMIX E 2.75%/DEXTROSE 5%	3	B/D
CLINIMIX E 4.25%/DEXTROSE 10%	3	B/D
CLINIMIX E 4.25%/DEXTROSE 5%	3	B/D
CLINIMIX E 5%/DEXTROSE 15%	3	B/D
CLINIMIX E 5%/DEXTROSE 20%	3	B/D
CLINIMIX E 8/10	3	B/D
CLINIMIX E 8/14	3	B/D
CLINISOL SF 15%	3	B/D
<i>dextrose 5% /electrolyte #48 viaflex</i>	1	
<i>dextrose 10%</i>	1	
<i>dextrose 10%/sodium chloride 0.2%</i>	1	
<i>dextrose 10%/sodium chloride 0.45%</i>	1	
<i>dextrose 2.5%/sodium chloride 0.45%</i>	1	
<i>dextrose 25% inj 250mg/ml</i>	1	
<i>dextrose 5%</i>	1	
<i>dextrose 5%/lactated ringers inj 2.7meq/l; 109meq/l; 5%; 28meq/l; 4meq/l; 130meq/l</i>	1	
<i>dextrose 5%/sodium chloride 0.2%</i>	1	
<i>dextrose 5%/sodium chloride 0.3%</i>	1	
<i>dextrose 5%/sodium chloride 0.33%</i>	1	
<i>dextrose 5%/sodium chloride 0.45%</i>	1	
<i>dextrose 5%/sodium chloride 0.9%</i>	1	

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Drug Name	Drug Tier	Requirements/Limits
<i>dextrose 50%</i>	1	
<i>dextrose/sodium chloride</i>	1	
<i>dextrose inj 20%</i>	1	
<i>fluoride chew 0.25mg, 0.5mg, 1mg</i>	2	
IONOSOL-MB/DEXTROSE 5% INJ 22MEQ/L; 5%; 23MEQ/L; 3MEQ/L; 3MMOLE/L; 20MEQ/L; 25MEQ/L	3	
ISOLYTE-P/DEXTROSE 5%	3	
ISOLYTE-S PH 7.4	3	
ISOLYTE-S INJ 27MEQ/L; 98MEQ/L; 23MEQ/L; 3MEQ/L; 5MEQ/L; 140MEQ/L	3	
<i>kcl 0.075%/d5w/nacl 0.45% inj 5%; 10meq/l; 0.45%</i>	1	
<i>kcl 0.15%/d5w/nacl 0.2%</i>	1	
<i>kcl 0.15%/d5w/nacl 0.225% inj 5%; 20meq/l; 0.225%</i>	1	
<i>kcl 0.15%/d5w/nacl 0.45% inj 5%; 20meq/l; 0.45%</i>	1	
<i>kcl 0.15%/d5w/nacl 0.9% inj 5%; 20meq/l; 0.9%</i>	1	
<i>kcl 0.3%/d5w/nacl 0.45% inj 5%; 40meq/l; 0.45%</i>	1	
<i>kcl 0.3%/d5w/nacl 0.9% inj 5%; 40meq/l; 0.9%</i>	1	
<i>klor-con 10</i>	1	
<i>klor-con 8</i>	1	
<i>klor-con m10</i>	1	
<i>klor-con m15</i>	1	
<i>klor-con m20</i>	1	
<i>magnesium sulfate in d5w inj 5%; 1gm/100ml</i>	1	
<i>magnesium sulfate/dextrose inj 5%; 1gm/100ml</i>	1	
MAGNESIUM SULFATE INJ 20GM/500ML	1	
<i>magnesium sulfate inj 2gm/50ml, 40gm/1000ml, 4gm/100ml, 4gm/50ml</i>	1	
<i>magnesium sulfate inj 50%</i>	2	
<i>multiple electrolytes injection type 1</i>	1	
NORMOSOL-M/D5W	3	
NORMOSOL-R	3	
PLENAMINE	3	B/D
<i>potassium chloride er cpcr</i>	1	
POTASSIUM CHLORIDE ER TBCR 15MEQ	1	
<i>potassium chloride er tbcrc 10meq, 15meq, 20meq, 8meq</i>	1	
<i>potassium chloride/dextrose/lactated ringers inj 3meq/l; 149meq/l; 5%; 28meq/l; 24meq/l; 130meq/l</i>	1	
<i>potassium chloride/dextrose/sodium chloride inj 5%; 10meq/l; 0.45%, 5%; 20meq/l; 0.225%, 5%; 20meq/l; 0.45%, 5%; 20meq/l; 0.9%, 5%; 30meq/l; 0.45%, 5%; 40meq/l; 0.45%, 5%; 40meq/l; 0.9%</i>	1	
<i>potassium chloride/dextrose inj 5%; 20meq/l</i>	1	
<i>potassium chloride/sodium chloride inj 20meq/l; 0.45%, 20meq/l; 0.9%, 40meq/l; 0.9%</i>	1	

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<i>potassium chloride inj 10meq/100ml, 10meq/50ml, 20meq/100ml, 20meq/50ml, 2meq/ml, 40meq/100ml</i>	1	
<i>potassium chloride oral soln 10%</i>	2	
<i>potassium citrate er</i>	1	
PREMASOL INJ 52MEQ/L; 1760MG/100ML; 880MG/100ML; 34MEQ/L; 1760MG/100ML; 372MG/100ML; 406MG/100ML; 526MG/100ML; 492MG/100ML; 492MG/100ML; 526MG/100ML; 356MG/100ML; 356MG/100ML; 390MG/100ML; 34MG/100ML; 152MG/100ML	3	B/D
PROSOL	3	B/D
<i>ringers injection inj 4.5meq/l; 156meq/l; 4meq/l; 147meq/l</i>	1	
<i>sodium chloride 0.45% inj</i>	2	
<i>sodium chloride inj 0.45%, 0.9%, 3%, 5%</i>	2	
<i>sodium fluoride chew 0.25mg, 0.5mg, 1mg</i>	2	
SODIUM FLUORIDE SOLN 0.5MG/ML	2	
TRAVASOL INJ 52MEQ/L; 1760MG/100ML; 880MG/100ML; 34MEQ/L; 1760MG/100ML; 372MG/100ML; 406MG/100ML; 526MG/100ML; 492MG/100ML; 492MG/100ML; 526MG/100ML; 356MG/100ML; 500MG/100ML; 356MG/100ML; 390MG/100ML; 34MG/100ML; 152MG/100ML	3	B/D
TROPHAMINE INJ 0.54GM/100ML; 1.2GM/100ML; 0.32GM/100ML; 0; 0; 0.5GM/100ML; 0.36GM/100ML; 0.48GM/100ML; 0.82GM/100ML; 1.4GM/100ML; 1.2GM/100ML; 0.34GM/100ML; 0.48GM/100ML; 0.68GM/100ML; 0.38GM/100ML; 5MEQ/L; 0.025GM/100ML; 0.42GM/100ML; 0.2GM/100ML; 0.24GM/100ML; 0.78GM/100ML	3	B/D
<i>Electrolyte/Mineral/Metal Modifiers</i>		
CHEMET	5	
<i>deferasirox tbso 125mg</i>	3	PA
<i>deferasirox tbso 250mg, 500mg</i>	5	PA
<i>deferiprone</i>	5	
FERRIPROX TWICE-A-DAY	5	
FERRIPROX SOLN	5	
FERRIPROX TABS 1000MG	5	
JYNARQUE TABS	5	QL(120 EA per 30 days); PA
JYNARQUE TBP	5	QL(56 EA per 28 days); PA
<i>penicillamine tabs</i>	5	
TOLVAPTAN TABS 15MG	5	QL(30 EA per 30 days); PA
<i>tolvaptan tabs 30mg</i>	5	QL(60 EA per 30 days); PA
<i>trientine hydrochloride caps 250mg</i>	5	
<i>Phosphate Binders</i>		

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<i>calcium acetate tabs 667mg</i>	2	
FOSRENOL PACK	5	
<i>lanthanum carbonate chew 1000mg</i>	5	
<i>sevelamer carbonate tabs</i>	4	
<i>sevelamer carbonate pack 2.4gm</i>	4	
<i>sevelamer hydrochloride</i>	4	
Potassium Binders		
<i>kionex susp</i>	1	
LOKELMA	4	QL(90 EA per 30 days)
<i>sodium polystyrene sulfonate powd</i>	1	
<i>sps</i>	1	
VELTASSA PACK 1GM	4	
VELTASSA PACK 16.8GM, 25.2GM, 8.4GM	4	
Vitamins		
<i>prenatal 19 tabs 100mg; 1000unit; 200mg; 7mg; 400unit; 12mcg; 25mg; 29mg; 1mg; 15mg; 20mg; 3mg; 3mg; 30unit; 20mg</i>	2	
<i>prenatal tabs 120mg; 0; 200mg; 10mcg; 2mg; 12mcg; 27mg; 1mg; 20mg; 10mg; 1200mcg; 3mg; 1.84mg; 10mg; 25mg</i>	2	
Gastrointestinal Agents		
Anti-Constipation Agents		
<i>constulose</i>	2	
<i>enulose</i>	2	
<i>generlac</i>	2	
KRISTALOSE PACK 10GM	3	
<i>lactulose soln 10gm/15ml</i>	2	
LINZESS	3	QL(30 EA per 30 days)
LUBIPROSTONE	4	QL(60 EA per 30 days)
MOVANTIK	4	QL(30 EA per 30 days)
RELISTOR INJ	5	PA
SYMPROIC	4	QL(30 EA per 30 days)
Anti-Diarrheal Agents		
<i>alosetron hydrochloride tabs 1mg</i>	5	
<i>diphenoxylate hydrochloride/atropine sulfate</i>	4	
<i>diphenoxylate/atropine liqd</i>	4	
<i>loperamide hcl caps</i>	2	
VIBERZI	5	PA
XERMELO	5	QL(90 EA per 30 days); PA
Antispasmodics, Gastrointestinal		
<i>dicyclomine hcl soln</i>	2	
<i>dicyclomine hydrochloride caps, tabs</i>	2	
<i>glycopyrrolate oral soln</i>	2	
<i>glycopyrrolate inj 0.2mg/ml, 0.4mg/2ml, 1mg/5ml, 4mg/20ml</i>	2	
GLYCOPYRROLATE TABS 1.5MG	4	

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Drug Name	Drug Tier	Requirements/Limits
<i>glycopyrrolate tabs 1mg, 2mg</i>	2	
<i>methscopolamine bromide tabs</i>	2	
Gastrointestinal Agents, Other		
GATTEX	5	PA
<i>gavilyte-c</i>	2	
<i>gavilyte-g</i>	2	
<i>gavilyte-n/ flavor pack</i>	2	
<i>metoclopramide hcl soln</i>	2	
<i>metoclopramide hcl tabs 5mg</i>	2	
<i>metoclopramide hydrochloride inj</i>	2	
<i>metoclopramide hydrochloride tabs 10mg</i>	2	
<i>metoclopramide odt tbdp 5mg</i>	2	
NITROGLYCERIN OINT 0.4%	4	
OICALIVA	5	QL(30 EA per 30 days); PA
<i>peg-3350/electrolytes</i>	2	
<i>peg-3350/electrolytes/ascorbate</i>	2	
<i>peg-3350/nacl/na bicarbonate/kcl</i>	2	
RECTIV	4	
SODIUM SULFATE/POTASSIUM SULFATE/MAGNESIUM SULFATE SOLN 1.6GM/177ML; 3.13GM/177ML; 17.5GM/177ML	4	
<i>sodium sulfate/potassium sulfate/magnesium sulfate soln 1.6gm/177ml; 3.13gm/177ml; 17.5gm/177ml</i>	4	
<i>ursodiol caps 300mg</i>	4	
<i>ursodiol tabs</i>	3	
VOWST	5	PA
XIFAXAN TABS 200MG	4	PA
XIFAXAN TABS 550MG	5	PA
Histamine2 (H2) Receptor Antagonists		
<i>cimetidine tabs</i>	2	
<i>famotidine premixed</i>	2	
<i>famotidine inj 200mg/20ml, 20mg/2ml, 40mg/4ml</i>	2	
<i>famotidine tabs 20mg, 40mg</i>	2	
<i>nizatidine caps</i>	2	
Protectants		
<i>misoprostol</i>	1	
<i>sucralfate tabs</i>	2	
Proton Pump Inhibitors		
<i>esomeprazole magnesium cpdr</i>	2	
<i>lansoprazole cpdr</i>	2	
<i>omeprazole dr cpdr 10mg, 40mg</i>	2	
<i>omeprazole cpdr 20mg, 40mg</i>	2	
<i>pantoprazole sodium inj, tbec</i>	2	
<i>rabeprazole sodium</i>	2	

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Drug Name	Drug Tier	Requirements/Limits
Genetic or Enzyme or Protein Disorder: Replacement, Modifiers, Treatment		
<i>Genetic or Enzyme or Protein Disorder: Replacement, Modifiers, Treatment</i>		
ALDURAZYME	5	PA
ARALAST NP INJ 1000MG, 500MG	5	PA
<i>betaine anhydrous</i>	5	
CERDELGA	5	PA
CEREZYME	5	PA
CHOLBAM	5	PA
CREON CPEP 120000UNIT; 24000UNIT; 76000UNIT, 15000UNIT; 3000UNIT; 9500UNIT, 180000UNIT; 36000UNIT; 114000UNIT, 30000UNIT; 6000UNIT; 19000UNIT, 60000UNIT; 12000UNIT; 38000UNIT	3	
<i>cromolyn sodium conc 100mg/5ml</i>	4	
CRYSVITA	5	PA
CYSTAGON	4	PA
<i>dichlorphenamide</i>	5	PA
ELAPRASE	5	PA
ELELYSO	5	PA
ENDARI	5	
EXONDYS 51	5	PA
FABRAZYME	5	PA
GALAFOLD	5	PA
GLASSIA	5	PA
KANUMA	5	PA
<i>l-glutamine</i>	5	
LUMIZYME	5	PA
<i>miglustat</i>	5	PA
NAGLAZYME	5	PA
<i>nitisinone</i>	5	PA
ORFADIN SUSP	5	PA
PANCREAZE CPEP 15200UNIT; 2600UNIT; 8800UNIT, 24600UNIT; 4200UNIT; 14200UNIT, 61500UNIT; 10500UNIT; 35500UNIT, 98400UNIT; 16800UNIT; 56800UNIT	3	
PANCREAZE CPEP 149900UNIT; 37000UNIT; 97300UNIT, 83900UNIT; 21000UNIT; 54700UNIT	5	
PROCYSBI	5	PA
PROLASTIN-C	5	PA
RAVICTI	5	PA
<i>sapropterin dihydrochloride</i>	5	PA
<i>sodium phenylbutyrate tabs</i>	5	
STRENSIQ	5	PA

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Drug Name	Drug Tier	Requirements/Limits
SUCRAID	5	PA
VIMIZIM	5	PA
VPRIV	5	PA
VYNDAQEL	5	PA
WELIREG	5	PA NSO
XIAFLEX	5	PA
XURIDEN	5	QL(120 EA per 30 days); PA
<i>yargesa</i>	5	PA
ZEMAIRA	5	PA
ZENPEP CPEP 105000UNIT; 25000UNIT; 79000UNIT, 14000UNIT; 3000UNIT; 10000UNIT, 168000UNIT; 40000UNIT; 126000UNIT, 24000UNIT; 5000UNIT; 17000UNIT, 252600UNIT; 60000UNIT; 189600UNIT, 42000UNIT; 10000UNIT; 32000UNIT, 63000UNIT; 15000UNIT; 47000UNIT, 84000UNIT; 20000UNIT; 63000UNIT	3	
Genitourinary Agents		
<i>Antispasmodics, Urinary</i>		
DARIFENACIN HYDROBROMIDE ER	3	
<i>fesoterodine fumarate er</i>	2	
<i>flavoxate hcl</i>	1	
GEMTESA	4	
MYRBETRIQ	3	
<i>oxybutynin chloride er</i>	2	
<i>oxybutynin chloride soln, tabs</i>	2	
<i>solifenacin succinate</i>	2	
<i>tolterodine tartrate er cp24 2mg</i>	2	
<i>tolterodine tartrate tabs 1mg</i>	2	
<i>tolterodine tartrate tabs 2mg</i>	4	
<i>trospium chloride</i>	2	
<i>Benign Prostatic Hypertrophy Agents</i>		
<i>alfuzosin hcl er</i>	2	
<i>doxazosin mesylate</i>	1	
<i>doxazosin tabs 2mg</i>	1	
<i>dutasteride caps</i>	2	
<i>finasteride tabs</i>	1	
<i>silodosin caps 4mg</i>	2	
<i>tadalafil tabs 2.5mg, 5mg</i>	4	QL(30 EA per 30 days); PA
<i>tamsulosin hydrochloride</i>	1	
<i>terazosin hcl caps 10mg, 1mg, 5mg</i>	1	
<i>terazosin hydrochloride caps 2mg</i>	1	
<i>Genitourinary Agents, Other</i>		
<i>acetic acid 0.25%</i>	2	
<i>bethanechol chloride tabs</i>	2	

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Drug Name	Drug Tier	Requirements/Limits
ELMIRON	5	
LITHOSTAT	4	
PHEXXI	4	
RENACIDIN SOLN 1980.6MG/30ML; 59.4MG/30ML; 980.4MG/30ML	4	
RIMSO-50	4	
THIOLA EC	5	
<i>tiopronin</i>	5	
<i>tiopronin dr</i>	5	
Hormonal Agents, Stimulant/Replacement/Modifying (Adrenal)		
<i>Hormonal Agents, Stimulant/Replacement/Modifying (Adrenal)</i>		
<i>betamethasone sodium phosphate/betamethasone acetate</i>	1	
DEXAMETHASONE INTENSOL	3	
DEXAMETHASONE SODIUM PHOSPHATE +RFID	2	
<i>dexamethasone sodium phosphate inj 100mg/10ml, 10mg/ml, 120mg/30ml, 20mg/5ml, 4mg/ml</i>	2	
<i>dexamethasone elix, soln</i>	2	
<i>dexamethasone tabs 0.5mg, 0.75mg, 1.5mg, 1mg, 2mg, 4mg, 6mg</i>	2	
<i>fludrocortisone acetate tabs</i>	1	
<i>hydrocortisone tabs 10mg, 20mg, 5mg</i>	2	
<i>methylprednisolone acetate inj 40mg/ml, 50mg/ml, 80mg/ml</i>	2	
<i>methylprednisolone dose pack tbpk</i>	2	
<i>methylprednisolone sodium succinate</i>	2	
<i>methylprednisolone sodiumsuccinate inj 40mg</i>	2	
<i>methylprednisolone tabs</i>	2	
<i>prednisolone sodium phosphate odt</i>	2	
<i>prednisolone sodium phosphate oral soln 10mg/5ml, 15mg/5ml, 20mg/5ml, 25mg/5ml, 5mg/5ml</i>	2	
<i>prednisolone soln</i>	2	
<i>prednisone tbpk</i>	1	
<i>prednisone tabs 10mg, 1mg, 2.5mg, 20mg, 50mg, 5mg</i>	1	
Hormonal Agents, Stimulant/Replacement/Modifying (Pituitary)		
<i>Hormonal Agents, Stimulant/Replacement/Modifying (Pituitary)</i>		
<i>chorionic gonadotropin</i>	4	PA
<i>desmopressin acetate tabs</i>	2	
<i>desmopressin acetate inj</i>	5	
DESMOPRESSIN ACETATE NASAL SOLN 1.5MG/ML	5	
<i>desmopressin acetate nasal soln 0.01%</i>	2	
INCRELEX	5	PA
ISTURISA TABS 1MG, 5MG	5	PA
LUPRON DEPOT-PED (6-MONTH)	5	PA
NORDITROPIN FLEXPRO	5	PA
NOVAREL INJ 5000UNIT	4	PA

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Drug Name	Drug Tier	Requirements/Limits
OMNITROPE	5	PA
PREGNYL	4	PA
<i>pregnyl w/diluent benzyl alcohol/nacl</i>	4	PA
SEROSTIM	5	PA
<i>vasopressin +rfid</i>	2	
<i>vasopressin inj 20unit/ml</i>	2	
<i>vasostrict</i>	2	
Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers)		
Androgens		
<i>danazol caps</i>	4	
<i>testosterone cypionate inj 100mg/ml, 200mg/ml</i>	2	
<i>testosterone enanthate inj</i>	2	
<i>testosterone pump</i>	4	PA
<i>testosterone gel 10mg/act</i>	2	PA
<i>testosterone gel 20.25mg/1.25gm, 25mg/2.5gm, 40.5mg/2.5gm, 50mg/5gm</i>	4	PA
Estrogens		
<i>afirmelle</i>	2	
<i>altavera</i>	2	
<i>alyacen 1/35</i>	2	
<i>alyacen 7/7/7</i>	2	
<i>amabelz tabs 1mg; 0.5mg</i>	2	
<i>amethyst</i>	2	
ANNOVERA	4	
<i>apri</i>	2	
<i>aranelle</i>	2	
<i>ashlyna</i>	2	
<i>aubra eq</i>	2	
<i>aurovela 1.5/30</i>	2	
<i>aurovela 1/20</i>	2	
<i>aurovela 24 fe</i>	2	
<i>aurovela fe 1.5/30</i>	2	
<i>aurovela fe 1/20</i>	2	
<i>aviane</i>	2	
<i>ayuna</i>	2	
<i>azurette</i>	2	
<i>balziva</i>	2	
<i>blisovi 24 fe</i>	2	
<i>blisovi fe 1.5/30</i>	2	
<i>blisovi fe 1/20</i>	2	
<i>briellyn</i>	2	
<i>camrese</i>	2	
<i>camrese lo</i>	2	

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<i>charlotte 24 fe</i>	2	
<i>chateal eq</i>	2	
<i>cryselle-28</i>	2	
<i>cyred eq</i>	2	
<i>dasetta 1/35</i>	2	
<i>dasetta 7/7/7</i>	2	
<i>daysee</i>	2	
<i>delyla</i>	2	
DEPO-ESTRADIOL INJ 5MG/ML	4	
<i>desogestrel/ethinyl estradiol</i>	2	
<i>dolishale</i>	2	
<i>dotti</i>	2	
<i>drospirenone/ethinyl estradiol</i>	2	
<i>drospirenone/ethinyl estradiol/levomefolate calcium</i>	2	
<i>elinest</i>	2	
<i>eluryng</i>	2	
<i>enilloring</i>	2	
<i>enpresse-28</i>	2	
<i>enskyce</i>	2	
<i>estarylla</i>	2	
<i>estradiol valerate inj 20mg/ml, 40mg/ml</i>	1	
<i>estradiol/norethindrone acetate tabs 1mg; 0.5mg</i>	2	
ESTRADIOL VAGINAL TABS	3	
<i>estradiol crea, pttw, ptwk, oral tabs</i>	2	
ESTRING	3	
<i>ethynodiol diacetate/ethinyl estradiol</i>	2	
<i>etonogestrel/ethinyl estradiol</i>	4	
<i>falmina</i>	2	
FEMRING	4	
<i>finzala</i>	2	
<i>fyavolv</i>	2	
<i>gemmily</i>	2	
<i>hailey 1.5/30</i>	2	
<i>hailey 24 fe</i>	2	
<i>hailey fe 1.5/30</i>	2	
<i>hailey fe 1/20</i>	2	
<i>iclevia</i>	2	
IMVEXXY MAINTENANCE PACK	4	PA
IMVEXXY STARTER PACK	4	PA
<i>introvale</i>	2	
<i>isibloom</i>	2	
<i>jaimiess</i>	2	
<i>jasmiel</i>	2	
<i>jinteli</i>	2	

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<i>jolessa</i>	2	
<i>joyeaux</i>	2	
<i>juleber</i>	2	
<i>junel 1.5/30</i>	2	
<i>junel 1/20</i>	2	
<i>junel fe 1.5/30</i>	2	
<i>junel fe 1/20</i>	2	
<i>junel fe 24</i>	2	
<i>kaitlib fe</i>	2	
<i>kalliga</i>	2	
<i>kariva</i>	2	
<i>kelnor 1/35</i>	2	
<i>kelnor 1/50</i>	2	
<i>kurvelo</i>	2	
<i>larin 1.5/30</i>	2	
<i>larin 1/20</i>	2	
<i>larin 24 fe</i>	2	
<i>larin fe 1.5/30</i>	2	
<i>larin fe 1/20</i>	2	
<i>layolis fe</i>	2	
<i>leena</i>	2	
<i>lessina</i>	2	
<i>levonest</i>	2	
<i>levonorgestrel and ethinyl estradiol</i>	2	
<i>levonorgestrel/ethinyl estradiol</i>	2	
<i>levonorgestrel/ethinyl estradiol/ferrous bisglycinate</i>	2	
<i>levora 0.15/30-28</i>	2	
LO LOESTRIN FE	4	
<i>lo-zumandimine</i>	2	
<i>lojaimiess</i>	2	
<i>loryna</i>	2	
<i>low-ogestrel</i>	2	
<i>lutra</i>	2	
<i>lyllana</i>	4	
<i>marlissa</i>	2	
<i>merzee</i>	2	
<i>mibelas 24 fe</i>	2	
<i>microgestin 1.5/30</i>	2	
<i>microgestin 1/20</i>	2	
<i>microgestin 24 fe</i>	2	
<i>microgestin fe 1.5/30</i>	2	
<i>microgestin fe 1/20</i>	2	
<i>mili</i>	2	
<i>mimvey</i>	2	

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<i>mono-linyah</i>	2	
NATAZIA	4	
<i>necon 0.5/35-28</i>	2	
NEXTSTELLIS	4	
<i>nikki</i>	2	
<i>norelgestromin/ethinyl estradiol</i>	2	
<i>norethindrone & ethinyl estradiol ferrous fumarate</i>	2	
<i>norethindrone acetate/ethinyl estradiol/ferrous fumarate</i>	2	
<i>norethindrone acetate/ethinyl estradiol tabs</i>	2	
<i>norethindrone/ethinyl estradiol/ferrous fumarate</i>	2	
<i>norgestimate/ethinyl estradiol</i>	2	
<i>nortrel 0.5/35 (28)</i>	2	
<i>nortrel 1/35</i>	2	
<i>nortrel 7/7/7</i>	2	
<i>nylia 1/35</i>	2	
<i>nylia 7/7/7</i>	2	
<i>nymyo</i>	2	
<i>ocella</i>	2	
<i>philith</i>	2	
<i>pintrea</i>	2	
<i>portia-28</i>	2	
PREMARIN CREA	3	
PREMARIN INJ	4	
PREMPRO	4	
<i>reclipsen</i>	2	
<i>rivelsa</i>	2	
<i>setlakin</i>	2	
<i>simliya</i>	2	
<i>simpesse</i>	2	
<i>sprintec 28</i>	2	
<i>sronyx</i>	2	
<i>syeda</i>	2	
<i>tarina 24 fe</i>	2	
<i>tarina fe 1/20 eq</i>	2	
<i>taysofy</i>	2	
<i>tilia fe</i>	2	
<i>tri-estarylla</i>	2	
<i>tri-legest fe</i>	2	
<i>tri-linyah</i>	2	
<i>tri-lo-estarylla</i>	2	
<i>tri-lo-marzia</i>	2	
<i>tri-lo-mili</i>	2	
<i>tri-lo-sprintec</i>	2	
<i>tri-mili</i>	2	

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<i>tri-nymyo</i>	2	
<i>tri-sprintec</i>	2	
<i>tri-vylibra</i>	2	
<i>tri-vylibra lo</i>	2	
<i>trivora-28</i>	2	
<i>turqoz</i>	2	
TWIRLA	4	
TYBLUME	2	
<i>tydemy</i>	2	
VELIVET	2	
<i>vestura</i>	2	
<i>vienva</i>	2	
<i>viorele</i>	2	
<i>volnea</i>	2	
<i>vyfemla</i>	2	
<i>vylibra</i>	2	
<i>wera</i>	2	
<i>wymzya fe</i>	2	
<i>xulane</i>	2	
YUVAFEM	3	
<i>zafemy</i>	4	
<i>zovia 1/35</i>	2	
<i>zumandimine</i>	2	
Progestins		
<i>camila</i>	2	
CRINONE	4	PA
<i>deblitane</i>	2	
DEPO-SUBQ PROVERA 104	3	
<i>emzahh</i>	2	
<i>errin</i>	2	
<i>gallifrey</i>	1	
<i>heather</i>	2	
<i>incassia</i>	2	
<i>jencycla</i>	2	
LILETTA	3	
<i>lyleq</i>	2	
<i>lyza</i>	2	
<i>medroxyprogesterone acetate inj, tabs</i>	1	
<i>megestrol acetate tabs</i>	2	PA NSO
MEGESTROL ACETATE SUSP 625MG/5ML	4	PA NSO
<i>megestrol acetate susp 40mg/ml</i>	4	PA NSO
NEXPLANON	3	
<i>nora-be</i>	2	
<i>norethindrone acetate tabs</i>	1	

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Drug Name	Drug Tier	Requirements/Limits
<i>norethindrone tabs</i>	1	
<i>norlyroc</i>	2	
<i>progesterone caps, inj</i>	1	
<i>sharobel</i>	2	
SLYND	4	
Selective Estrogen Receptor Modifying Agents		
OSPHENA	4	QL(30 EA per 30 days); PA
<i>raloxifene hydrochloride</i>	2	
Hormonal Agents, Stimulant/Replacement/Modifying (Thyroid)		
Hormonal Agents, Stimulant/Replacement/Modifying (Thyroid)		
ADTHYZA TABS 120MG, 15MG, 30MG, 60MG, 90MG	4	
ARMOUR THYROID	4	
<i>euthyrox tabs 100mcg, 112mcg, 125mcg, 137mcg, 150mcg, 175mcg, 200mcg, 25mcg, 50mcg, 75mcg</i>	1	
<i>euthyrox tabs 88mcg</i>	2	
<i>levo-t</i>	1	
<i>levothyroxine sodium tabs</i>	1	
<i>levothyroxine sodium caps</i>	4	
LEVOTHYROXINE SODIUM INJ 100MCG/ML	5	
<i>levothyroxine sodium inj 100mcg/5ml, 100mcg, 200mcg/5ml, 200mcg, 500mcg/5ml, 500mcg</i>	5	
<i>levoxyl tabs 100mcg, 112mcg, 125mcg, 137mcg, 150mcg, 175mcg, 200mcg, 25mcg, 50mcg, 75mcg, 88mcg</i>	2	
LIOTHYRONINE SODIUM INJ	5	
<i>liothyronine sodium tabs</i>	2	
NIVA THYROID	4	
<i>np thyroid 120</i>	4	
<i>np thyroid 15</i>	4	
<i>np thyroid 30</i>	4	
<i>np thyroid 60</i>	4	
<i>np thyroid 90</i>	4	
SYNTHROID TABS	3	
THYROID TABS 120MG, 15MG, 30MG, 60MG, 90MG	4	
<i>unithroid</i>	2	
Hormonal Agents, Suppressant (Adrenal or Pituitary)		
Hormonal Agents, Suppressant (Adrenal or Pituitary)		
<i>cabergoline</i>	2	
ELIGARD	4	PA NSO
FIRMAGON INJ 80MG	4	
FIRMAGON INJ 120MG/VIAL	5	
LANREOTIDE ACETATE INJ 120MG/0.5ML	5	PA NSO
<i>lanreotide acetate inj 120mg/0.5ml</i>	5	PA NSO
LEUPROLIDE ACETATE INJ 22.5MG	4	PA NSO
<i>leuprolide acetate inj 1mg/0.2ml</i>	4	PA NSO

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Drug Name	Drug Tier	Requirements/Limits
LUPRON DEPOT (1-MONTH)	5	PA NSO
LUPRON DEPOT (3-MONTH)	5	PA NSO
LUPRON DEPOT (4-MONTH)	5	PA NSO
LUPRON DEPOT (6-MONTH)	5	PA NSO
LUPRON DEPOT-PED (1-MONTH)	5	PA
LUPRON DEPOT-PED (3-MONTH)	5	PA
<i>mifepristone tabs 300mg</i>	5	PA
<i>octreotide acetate inj 100mcg/ml, 200mcg/ml, 50mcg/ml</i>	4	PA
<i>octreotide acetate inj 1000mcg/ml, 500mcg/ml</i>	5	PA
ORGOVYX	5	PA NSO
SANDOSTATIN LAR DEPOT	5	PA
SIGNIFOR	5	PA
SIGNIFOR LAR	5	PA
SOMATULINE DEPOT INJ 120MG/0.5ML	5	PA NSO
SOMATULINE DEPOT INJ 60MG/0.2ML, 90MG/0.3ML	5	PA
SOMAVERT	5	PA
SYNAREL	5	
TRELSTAR MIXJECT	4	PA NSO
ZOLADEX INJ 3.6MG	4	PA NSO
ZOLADEX INJ 10.8MG	5	PA NSO
Hormonal Agents, Suppressant (Thyroid)		
<i>Antithyroid Agents</i>		
<i>methimazole tabs 10mg, 5mg</i>	1	
<i>propylthiouracil tabs</i>	1	
Immunological Agents		
<i>Angioedema Agents</i>		
BERINERT	5	PA
CINRYZE	5	PA
HAEGARDA	5	PA
<i>icatibant acetate</i>	5	PA
KALBITOR	5	PA
ORLADEYO	5	PA
RUCONEST	5	PA
<i>sajazir</i>	5	PA
TAKHZYRO	5	PA
<i>Immunoglobulins</i>		
ALYGLO	5	B/D
ASCENIV	5	B/D
ATGAM	5	
BEYFORTUS	4	
BIVIGAM INJ 10%, 5GM/50ML	5	B/D
CUVITRU	5	PA
CYTOGAM INJ 50MG/ML	5	

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FLEBOGAMMA DIF INJ 10GM/100ML, 10GM/200ML, 2.5GM/50ML, 20GM/200ML, 20GM/400ML, 5GM/100ML, 5GM/50ML	5	B/D
GAMASTAN	4	
GAMMAGARD LIQUID	5	B/D
GAMMAGARD S/D IGA LESS THAN 1MCG/ML	5	B/D
GAMMAKED INJ 10GM/100ML, 20GM/200ML, 5GM/50ML	5	B/D
GAMMAPLEX INJ 10GM/100ML, 10GM/200ML, 20GM/200ML, 20GM/400ML, 5GM/100ML, 5GM/50ML	5	B/D
GAMUNEX-C INJ 10GM/100ML, 2.5GM/25ML, 20GM/200ML, 40GM/400ML, 5GM/50ML	5	B/D
HEPAGAM B INJ 312UNIT/ML	5	B/D
HIZENTRA INJ 10GM/50ML	5	PA
HIZENTRA INJ 10GM/50ML, 1GM/5ML, 2GM/10ML, 4GM/20ML	5	PA
HYPERHEP B	5	B/D
HYPERRHO S/D MINI-DOSE	4	
HYPERRHO S/D INJ 1500UNIT	4	
HYQVIA	5	B/D
MICRHOGAM ULTRA-FILTERED PLUS	4	
NABI-HB INJ 312UNIT/ML	5	B/D
OCTAGAM INJ 10GM/100ML, 10GM/200ML, 1GM/20ML, 2.5GM/50ML, 20GM/200ML, 2GM/20ML, 30GM/300ML, 5GM/100ML, 5GM/50ML	5	B/D
PRIVIGEN	5	B/D
RHOGAM ULTRA-FILTERED PLUS	4	
RHOPHYLAC	4	
SYNAGIS INJ 100MG/ML, 50MG/0.5ML	5	PA
THYMOGLOBULIN	5	
VARIZIG INJ 125UNIT/1.2ML	5	
WINRHO SDF INJ 15000UNIT/13ML, 1500UNIT/1.3ML, 2500UNIT/2.2ML, 5000UNIT/4.4ML	5	
XEMBIFY	5	B/D
<i>Immunological Agents, Other</i>		
ACTEMRA	5	PA
ACTEMRA ACTPEN	5	PA
ARCALYST	5	PA
BENLYSTA INJ 200MG/ML	5	
COSENTYX	5	PA
COSENTYX SENSOREADY PEN	5	PA
COSENTYX UNOREADY	5	PA
DUPIXENT INJ 100MG/0.67ML	5	QL(1.34 ML per 28 days); PA
DUPIXENT INJ 200MG/1.14ML	5	QL(4.56 ML per 28 days); PA

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Drug Name	Drug Tier	Requirements/Limits
DUPIXENT INJ 300MG/2ML	5	QL(8 ML per 28 days); PA
EMPAVELI	5	PA
ILARIS INJ 150MG/ML	5	PA
KINERET	5	PA
LEMTRADA	5	PA
ORENCIA CLICKJECT	5	PA
ORENCIA INJ 125MG/ML, 50MG/0.4ML, 87.5MG/0.7ML	5	PA
OTEZLA TBPK 0	5	PA
RAGWITEK	4	
RIDAURA	5	
RINVOQ	5	PA
SIMULECT	5	
SKYRIZI PEN	5	PA
SKYRIZI INJ 150MG/ML, 180MG/1.2ML, 360MG/2.4ML	5	PA
SOLIRIS	5	PA
STELARA INJ 45MG/0.5ML, 90MG/ML	5	PA
SYLVANT	5	PA
TALTZ	5	PA
TAVNEOS	5	QL(180 EA per 30 days); PA
TYENNE INJ 162MG/0.9ML	5	PA
TYENNE INJ 162MG/0.9ML, 200MG/10ML, 400MG/20ML, 80MG/4ML	5	PA
ULTOMIRIS INJ 1100MG/11ML, 300MG/3ML	5	PA
XELJANZ	5	PA
XELJANZ XR	5	PA
XOLAIR	5	PA
<i>Immunostimulants</i>		
ACTIMMUNE	5	
BESREMI	5	PA NSO
PEGASYS INJ 180MCG/ML	5	
<i>Immunosuppressants</i>		
ADALIMUMAB-ADAZ	5	PA
ADALIMUMAB-ADBIM STARTER PACKAGE FOR CROHNS DISEASE/UC/HS	5	PA
ADALIMUMAB-ADBIM STARTER PACKAGE FOR PSORIASIS/UVEITIS	5	PA
ADALIMUMAB-ADBIM INJ 40MG/0.4ML	5	PA
AMJEVITA INJ 20MG/0.2ML, 40MG/0.4ML, 40MG/0.8ML, 80MG/0.8ML	5	PA
ASTAGRAF XL	4	B/D
AVSOLA	5	PA
AZATHIOPRINE INJ	5	B/D
<i>azathioprine tabs 50mg</i>	1	B/D
<i>azathioprine tabs 100mg, 75mg</i>	2	B/D

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BENLYSTA INJ 120MG, 400MG	5	
CIMZIA	5	PA
CIMZIA STARTER KIT	5	PA
<i>cyclosporine modified</i>	4	B/D
<i>cyclosporine caps 100mg, 25mg</i>	4	B/D
<i>cyclosporine inj 50mg/ml</i>	5	
ENBREL MINI	5	PA
ENBREL SURECLICK	5	PA
ENBREL INJ 25MG/0.5ML, 50MG/ML	5	PA
<i>everolimus tabs 0.25mg, 0.5mg, 0.75mg, 1mg</i>	5	B/D
<i>gengraf caps 100mg, 25mg</i>	4	B/D
<i>gengraf soln</i>	4	B/D
HADLIMA	5	PA
HADLIMA PUSHTOUCH	5	PA
INFLECTRA	5	PA
<i>infliximab</i>	5	PA
JYLAMVO	5	
<i>leflunomide</i>	2	
LUPKYNIS	5	QL(180 EA per 30 days); PA
<i>methotrexate sodium tabs</i>	1	
<i>methotrexate sodium inj 1gm/40ml, 1gm, 250mg/10ml, 50mg/2ml</i>	1	
<i>methotrexate inj 50mg/2ml</i>	1	
MYCOPHENOLATE MOFETIL INJ	3	B/D
<i>mycophenolate mofetil caps, tabs</i>	2	B/D
<i>mycophenolate mofetil susr</i>	5	B/D
<i>mycophenolic acid dr</i>	2	B/D
NULOJIX	5	
ORENCIA INJ 250MG	5	PA
PEGASYS INJ 180MCG/0.5ML	5	
PROGRAF PACK	4	B/D
REMICADE	5	PA
RENFLEXIS	5	PA
REZUROCK	5	QL(60 EA per 30 days); PA
<i>sirolimus tabs</i>	4	B/D
<i>sirolimus soln</i>	5	B/D
<i>tacrolimus caps 0.5mg, 1mg, 5mg</i>	2	B/D
XATMEP	4	
Vaccines		
ABRYSVO	3	
ACTHIB INJ 0	3	
ADACEL	3	
AREXVY	3	
BCG VACCINE INJ 50MG	4	

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Drug Name	Drug Tier	Requirements/Limits
BEXSERO	3	
BOOSTRIX	3	
DAPTACEL INJ 15LF/0.5ML; 23MCG/0.5ML; 5LF/0.5ML	3	
DENGVAXIA	4	
DIPHThERIA/TETANUS TOXOIDS ADSORBED PEDIATRIC	4	
ENGERIX-B	3	B/D
GARDASIL 9	4	
HAVRIX INJ 1440ELU/ML, 720ELU/0.5ML	3	
HEPLISAV-B	3	B/D
HIBERIX	3	
IMOVAX RABIES (H.D.C.V.)	4	B/D
INFANRIX	3	
IPOL INACTIVATED IPV	4	
IXCHIQ	4	
IXIARO	4	
JYNNEOS	3	
KINRIX INJ 25LFU/0.5ML; 58MCG/0.5ML; 0; 10LFU/0.5ML	4	
M-M-R II	4	
MENACTRA	3	
MENQUADFI	3	
MENVEO	3	
MRESVIA	3	
PEDIARIX INJ 25LFU/0.5ML; 10MCG/0.5ML; 58MCG/0.5ML; 0; 10LFU/0.5ML	4	
PEDVAX HIB INJ 7.5MCG/0.5ML	3	
PENBRAYA	3	
PENTACEL	4	
PREHEVBRIO	3	B/D
PRIORIX	4	
PROQUAD	3	
QUADRACEL	4	
RABAVERT	4	B/D
RECOMBIVAX HB	3	B/D
ROTARIX	4	
ROTATEQ SOLN	4	
SHINGRIX	3	
STAMARIL	4	
TDVAX	3	
TENIVAC	3	
TICOVAC	3	
TRUMENBA	3	
TWINRIX	4	

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Drug Name	Drug Tier	Requirements/Limits
TYPHIM VI	4	
VAQTA	3	
VARIVAX	3	
VAXELIS	4	
YF-VAX	4	
Inflammatory Bowel Disease Agents		
<i>Aminosalicylates</i>		
<i>balsalazide disodium</i>	2	
<i>mesalamine dr</i>	4	
<i>mesalamine er cpcr</i>	4	
<i>mesalamine er cp24</i>	4	
<i>mesalamine enem, kit</i>	4	
<i>sulfasalazine tabs</i>	1	
<i>sulfasalazine tbec</i>	2	
<i>Glucocorticoids</i>		
<i>budesonide cpep 3mg</i>	4	
BUDESONIDE FOAM 2MG	3	
<i>hydrocortisone crea 1%, 2.5%</i>	1	
<i>hydrocortisone enem 100mg/60ml</i>	4	
<i>procto-med hc</i>	1	
<i>proctosol hc</i>	1	
<i>proctozone-hc</i>	1	
Metabolic Bone Disease Agents		
<i>Metabolic Bone Disease Agents</i>		
<i>alendronate sodium tabs 10mg, 35mg, 5mg, 70mg</i>	1	
<i>calcitonin salmon nasal soln</i>	2	
<i>calcitonin salmon inj</i>	5	
<i>calcitonin-salmon soln</i>	2	
<i>calcitriol caps 0.25mcg, 0.5mcg</i>	1	
CALCITRIOL INJ 1MCG/ML	1	
<i>calcitriol oral soln 1mcg/ml</i>	1	
<i>cinacalcet hydrochloride</i>	4	
<i>doxercalciferol inj</i>	2	PA
<i>doxercalciferol caps</i>	4	PA
FORTEO INJ 600MCG/2.4ML	5	PA
<i>ibandronate sodium tabs</i>	2	
MIACALCIN INJ	5	
<i>pamidronate disodium inj 30mg/10ml, 6mg/ml, 90mg/10ml</i>	1	
PARICALCITOL CAPS 1MCG, 2MCG	3	
PARICALCITOL CAPS 4MCG	4	
<i>paricalcitol inj</i>	4	
PROLIA	4	
<i>risedronate sodium</i>	2	
<i>risedronate sodium dr</i>	2	

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TERIPARATIDE INJ 620MCG/2.48ML	5	PA
<i>teriparatide inj 600mcg/2.4ml</i>	5	PA
XGEVA	5	PA NSO
<i>zoledronic acid inj 4mg/100ml, 4mg/5ml, 5mg/100ml</i>	4	
Miscellaneous Therapeutic Agents		
<i>Miscellaneous Therapeutic Agents</i>		
ALCOHOL PREP PADS	3	
<i>atropine sulfate inj 0.25mg/5ml</i>	1	
B-D INSULIN SYRINGE ULTRAFINE II/0.3ML/31G X 5/16"	3	
BD INSULIN SYRINGE SAFETYGLIDE/1ML/29G X 1/2"	3	
BD INSULIN SYRINGE ULTRA-FINE/0.5ML/30G X 12.7MM	3	
BD INSULIN SYRINGE ULTRA-FINE/1ML/31G X 8MM	3	
BD PEN NEEDLE/ORIGINAL/ULTRA-FINE/29G X 12.7MM	3	
CLINOLIPID	3	B/D
COSELA	5	PA
CURITY ALL PURPOSE SPONGES 2"X2"	3	
CURITY GAUZE PADS 2"X2" 12 PLY	3	
<i>deferoxamine mesylate inj 2gm</i>	2	PA
<i>deferoxamine mesylate inj 500mg</i>	5	PA
DROPLET PEN NEEDLES 29GX10MM	3	
EASY COMFORT INSULIN SYRINGE/1ML/32GX5/16"	3	
EASY COMFORT INSULIN SYRINGES/0.5ML/32GX5/16"	3	
<i>fomepizole inj 1.5gm/1.5ml</i>	5	
GLOBAL ALCOHOL PREP EASE PADS	3	
INTRALIPID INJ 20GM/100ML, 30GM/100ML	3	B/D
<i>lactated ringers irrigation soln 3meq/l; 109meq/l; 28meq/l; 4meq/l; 130meq/l</i>	3	
<i>levocarnitine soln, tabs</i>	1	
<i>methergine tabs</i>	5	
<i>methylergonovine maleate inj</i>	1	
<i>methylergonovine maleate tabs</i>	5	
NUTRILIPID	3	B/D
OMNIPOD 5 DEXG7G6 INTRO KIT (GEN 5)	4	PA
OMNIPOD 5 DEXG7G6 PODS (GEN 5)	4	PA
OMNIPOD 5 G7 INTRO KIT (GEN 5)	4	PA
OMNIPOD 5 G7 PODS (GEN 5)	4	PA
OMNIPOD 5 LIBRE2 PLUS G6	4	PA
OMNIPOD 5 LIBRE2 PLUS G6 PODS	4	PA
OMNIPOD CLASSIC PODS (GEN 3)	4	PA
OMNIPOD DASH INTRO KIT (GEN 4)	4	PA
OMNIPOD DASH PDM KIT (GEN 4)	4	PA

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OMNIPOD DASH PODS (GEN 4)	4	PA
PROTOPAM CHLORIDE INJ	4	
<i>ringers irrigation soln 4.5meq/l; 156meq/l; 4meq/l; 147meq/l</i>	1	
<i>sodium chloride 0.9%</i>	2	
<i>sodium phenylacetate/sodium benzoate</i>	5	
<i>sterile water for irrigation</i>	1	
SURE COMFORT INSULIN SYRINGE/U-100/0.5ML/29G X 1/2"	3	
<i>tis-u-sol</i>	1	
TODAYS HEALTH ORIGINAL PEN NEEDLES 29G X 1/2"	3	
VISTOGARD	5	
Ophthalmic Agents		
<i>Ophthalmic Agents, Other</i>		
<i>atropine sulfate soln 1%</i>	1	
<i>bacitracin/polymyxin b</i>	2	
<i>brimonidine tartrate/timolol maleate</i>	2	
<i>cyclopentolate hcl soln 1%</i>	1	
<i>cyclopentolate hydrochloride soln 1%</i>	1	
<i>cyclosporine emul 0.05%</i>	4	
CYSTADROPS	5	QL(20 ML per 28 days); PA
CYSTARAN	5	QL(60 ML per 28 days); PA
<i>dorzolamide hcl/timolol maleate</i>	1	
<i>dorzolamide hydrochloride/timolol maleate pf</i>	1	
<i>neo-polycin</i>	2	
<i>neo-polycin hc</i>	2	
<i>neomycin/bacitracin/polymyxin</i>	2	
<i>neomycin/polymyxin/bacitracin/hydrocortisone</i>	2	
<i>neomycin/polymyxin/dexamethasone</i>	1	
<i>neomycin/polymyxin/gramicidin</i>	1	
<i>neomycin/polymyxin/hydrocortisone ophthalmic susp 1%; 3.5mg/ml; 10000unit/ml</i>	2	
OXERVATE	5	PA
<i>phenylephrine hcl soln 10%</i>	1	
<i>polycin</i>	2	
<i>polymyxin b sulfate/trimethoprim sulfate</i>	1	
<i>proparacaine hcl</i>	1	
RESTASIS	4	
RESTASIS MULTIDOSE	4	
ROCKLATAN	4	
SIMBRINZA	3	
<i>sulfacetamide sodium/prednisolone sodium phosphate</i>	1	
<i>tobramycin/dexamethasone</i>	2	
VABYSMO SOSY	5	
VABYSMO SOLN	5	

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XIIDRA	3	
Ophthalmic Anti-allergy Agents		
ALOCRIL	4	
<i>azelastine hcl ophthalmic soln 0.05%</i>	2	
<i>cromolyn sodium soln 4%</i>	1	
<i>olopatadine hydrochloride soln 0.2%</i>	2	
Ophthalmic Anti-Infectives		
<i>bacitracin</i>	2	
<i>ciprofloxacin hydrochloride soln 0.3%</i>	1	
<i>erythromycin oint 5mg/gm</i>	1	
<i>gatifloxacin</i>	2	
<i>gentamicin sulfate ophthalmic soln 0.3%</i>	1	
<i>levofloxacin ophthalmic soln 0.5%</i>	2	
<i>moxifloxacin hydrochloride ophthalmic soln 0.5%</i>	2	
NATACYN	4	
<i>ofloxacin ophthalmic soln 0.3%</i>	1	
<i>sulfacetamide sodium oint 10%</i>	2	
<i>sulfacetamide sodium soln 10%</i>	1	
<i>tobramycin soln 0.3%</i>	1	
<i>trifluridine</i>	2	
XDEMVY	5	QL(10 ML per 42 days)
ZIRGAN	4	
Ophthalmic Anti-inflammatory		
<i>bromfenac</i>	4	
BROMFENAC SODIUM SOLN 0.075%	4	
<i>dexamethasone sodium phosphate ophthalmic soln 0.1%</i>	1	
<i>diclofenac sodium ophthalmic soln 0.1%</i>	2	
<i>flurbiprofen sodium</i>	1	
<i>ketorolac tromethamine ophthalmic soln 0.5%</i>	1	
<i>loteprednol etabonate susp 0.5%</i>	4	
<i>prednisolone acetate</i>	1	
<i>prednisolone sodium phosphate ophthalmic soln 1%</i>	1	
Ophthalmic Beta-Adrenergic Blocking Agents		
<i>betaxolol hcl soln 0.5%</i>	1	
<i>carteolol hcl</i>	1	
<i>levobunolol hcl soln 0.5%</i>	1	
<i>timolol maleate ophthalmic gel forming solg 0.25%</i>	2	
<i>timolol maleate ophthalmic gel forming solg 0.5%</i>	4	
<i>timolol maleate soln 0.25%, 0.5%</i>	1	
<i>timolol maleate soln 0.5%</i>	2	; Once Daily
Ophthalmic Intraocular Pressure Lowering Agents, Other		
<i>acetazolamide</i>	2	
<i>acetazolamide er</i>	2	
<i>apraclonidine</i>	1	

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<i>brimonidine tartrate soln 0.15%, 0.2%</i>	2	
<i>dorzolamide hydrochloride</i>	1	
<i>methazolamide tabs</i>	4	
<i>pilocarpine hcl soln 1%, 2%, 4%</i>	2	
RHOPRESSA	4	
Ophthalmic Prostaglandin and Prostamide Analogs		
<i>latanoprost soln</i>	1	
LUMIGAN	3	
<i>tafluprost</i>	4	
<i>travoprost</i>	2	
VYZULTA	4	
Otic Agents		
Otic Agents		
<i>acetic acid</i>	2	
<i>flac</i>	2	
<i>fluocinolone acetonide ear drops</i>	2	
<i>fluocinolone acetonide oil 0.01%</i>	2	
<i>neomycin/polymyxin/hc</i>	2	
<i>neomycin/polymyxin/hydrocortisone soln 1%; 3.5mg/ml; 10000unit/ml</i>	2	
<i>neomycin/polymyxin/hydrocortisone otic susp 1%; 3.5mg/ml; 10000unit/ml</i>	2	
<i>ofloxacin otic soln 0.3%</i>	1	
Respiratory Tract/Pulmonary Agents		
Anti-inflammatories, Inhaled Corticosteroids		
ARNUITY ELLIPTA	3	
<i>budesonide susp 0.25mg/2ml, 0.5mg/2ml, 1mg/2ml</i>	2	B/D
<i>flunisolide soln 0.025%</i>	1	
<i>fluticasone propionate susp 50mcg/act</i>	2	
QVAR REDHALER	3	
Antihistamines		
<i>azelastine hcl nasal soln 0.15%</i>	2	
<i>azelastine hydrochloride soln 0.1%</i>	2	
<i>cetirizine hydrochloride soln 5mg/5ml</i>	2	
<i>cyproheptadine hcl syrp</i>	2	
<i>cyproheptadine hydrochloride tabs</i>	2	
<i>desloratadine</i>	2	
<i>diphenhydramine hcl elix</i>	2	PA
<i>diphenhydramine hcl inj 50mg/ml</i>	2	
<i>diphenhydramine hydrochloride inj</i>	2	
<i>hydroxyzine hcl tabs 50mg</i>	4	PA
<i>hydroxyzine hydrochloride tabs 10mg, 25mg</i>	4	PA
<i>hydroxyzine pamoate caps</i>	4	PA
<i>levocetirizine dihydrochloride tabs</i>	2	

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Antileukotrienes		
<i>montelukast sodium chew, pack, tabs</i>	1	
<i>zafirlukast</i>	2	
Bronchodilators, Anticholinergic		
ATROVENT HFA	3	
<i>ipratropium bromide inhalation soln</i>	1	B/D
<i>ipratropium bromide nasal soln</i>	1	
SPIRIVA RESPIMAT	3	
<i>tiotropium bromide</i>	4	
TUDORZA PRESSAIR	3	
Bronchodilators, Sympathomimetic		
<i>albuterol sulfate hfa aers 108mcg/act</i>	1	
<i>albuterol sulfate hfa aers 108mcg/act</i>	2	
<i>albuterol sulfate syrp</i>	1	
<i>albuterol sulfate nebu</i>	2	B/D
<i>albuterol sulfate tabs</i>	2	
<i>arformoterol tartrate</i>	4	B/D
<i>epinephrine inj 0.15mg/0.15ml, 0.15mg/0.3ml, 0.3mg/0.3ml</i>	2	
<i>isoproterenol hydrochloride</i>	2	
<i>levalbuterol hcl nebu 0.63mg/3ml</i>	4	B/D
<i>levalbuterol hydrochloride nebu 0.63mg/3ml</i>	4	B/D
<i>levalbuterol tartrate hfa</i>	2	
PROAIR DIGIHALER	3	
PROAIR RESPICLICK	3	
SEREVENT DISKUS	3	
<i>terbutaline sulfate tabs</i>	2	
<i>terbutaline sulfate inj</i>	5	
<i>ventolin hfa</i>	2	
Cystic Fibrosis Agents		
CAYSTON	5	PA
KALYDECO	5	PA
ORKAMBI	5	PA
PULMOZYME	5	PA
SYMDEKO	5	PA
TOBI PODHALER	5	PA
<i>tobramycin nebu 300mg/5ml</i>	5	PA
TRIKAFTA THPK	5	PA
TRIKAFTA TBPK 100MG; 0; 50MG	5	PA
Mast Cell Stabilizers		
<i>cromolyn sodium nebu 20mg/2ml</i>	3	B/D
Phosphodiesterase Inhibitors, Airways Disease		
<i>aminophylline inj</i>	1	
<i>elixophyllin</i>	1	
<i>roflumilast</i>	4	ST

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<i>theophylline</i>	1	
<i>theophylline er tb24</i>	2	
<i>theophylline er tb12 300mg, 450mg</i>	2	
Pulmonary Antihypertensives		
ADEMPAS	5	PA
<i>alyq</i>	4	PA
<i>ambrisentan</i>	5	PA
<i>epoprostenol sodium</i>	5	PA
OPSUMIT	5	PA
ORENITRAM TITRATION KIT MONTH 1	5	QL(336 EA per 365 days); PA
ORENITRAM TITRATION KIT MONTH 2	5	QL(672 EA per 365 days); PA
ORENITRAM TITRATION KIT MONTH 3	5	QL(504 EA per 365 days); PA
ORENITRAM TBCR 0.125MG	3	PA
ORENITRAM TBCR 0.25MG, 1MG, 2.5MG, 5MG	5	PA
REMODULIN	5	PA
SILDENAFIL CITRATE TABS	3	PA
<i>sildenafil inj</i>	5	PA
<i>tadalafil tabs 20mg</i>	4	PA
<i>treprostinil</i>	5	PA
TYVASO	5	PA
TYVASO DPI INSTITUTIONAL KIT	5	PA
TYVASO DPI MAINTENANCE KIT	5	PA
TYVASO DPI TITRATION KIT	5	PA
TYVASO REFILL KIT	5	PA
TYVASO STARTER KIT	5	PA
UPTRAVI	5	QL(60 EA per 30 days); PA
UPTRAVI TITRATION PACK	5	QL(400 EA per 365 days); PA
VENTAVIS	5	PA
Pulmonary Fibrosis Agents		
OFEV	5	QL(60 EA per 30 days); PA
<i>pirfenidone caps</i>	5	PA
PIRFENIDONE TABS 534MG	5	PA
<i>pirfenidone tabs 267mg, 801mg</i>	5	PA
Respiratory Tract Agents, Other		
<i>acetylcysteine inhalation soln</i>	2	B/D
<i>acetylcysteine inj</i>	2	
ANORO ELLIPTA	3	
BEVESPI AEROSPHERE	4	
BREO ELLIPTA	3	
<i>breynd</i>	4	QL(10.3 GM per 30 days)
BREZTRI AEROSPHERE	3	
BRONCHITOL	5	QL(560 EA per 28 days); PA
COMBIVENT RESPIMAT	3	
DULERA	3	

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<i>fluticasone propionate/salmeterol diskus</i>	2	
<i>fluticasone propionate/salmeterol aepb 113mcg/act; 14mcg/act, 232mcg/act; 14mcg/act, 500mcg/act; 50mcg/act, 55mcg/act; 14mcg/act</i>	2	
<i>ipratropium bromide/albuterol sulfate</i>	1	B/D
NUCALA	5	PA
<i>ribavirin solr 6gm</i>	5	PA
STIOLTO RESPIMAT	3	
TEZSPIRE	5	QL(1.91 ML per 28 days); PA
TRELEGY ELLIPTA	3	
<i>wixela inhub</i>	2	
Skeletal Muscle Relaxants		
<i>Skeletal Muscle Relaxants</i>		
<i>cyclobenzaprine hydrochloride tabs 10mg, 5mg</i>	2	PA
<i>methocarbamol tabs 500mg, 750mg</i>	2	
Sleep Disorder Agents		
<i>Sleep Promoting Agents</i>		
BELSOMRA	3	
DAYVIGO	3	
<i>doxepin hydrochloride tabs 3mg, 6mg</i>	2	
<i>flurazepam hydrochloride</i>	2	QL(30 EA per 30 days)
HETLIOZ LQ	5	PA
<i>pentobarbital sodium</i>	4	
<i>ramelteon</i>	4	QL(30 EA per 30 days)
<i>tasimelteon</i>	5	PA
<i>temazepam</i>	2	QL(30 EA per 30 days)
<i>triazolam</i>	2	QL(30 EA per 30 days)
<i>zolpidem tartrate tabs</i>	2	
Wakefulness Promoting Agents		
<i>armodafinil</i>	2	PA
MODAFINIL TABS	3	PA
SODIUM OXYBATE	5	PA
SUNOSI	4	QL(30 EA per 30 days); PA

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<i>amiloride hcl</i>	38	ARCALYST	60
<i>amiloride/hydrochlorothiazide</i>	37	AREXVY	62
<i>aminocaproic acid</i>	34	<i>arformoterol tartrate</i>	69
<i>aminophylline</i>	69	ARIKAYCE	4
AMINOSYN II	44	<i>aripiprazole</i>	25
AMINOSYN-PF	45	<i>aripiprazole odt</i>	25
AMINOSYN-PF 7%	45	ARISTADA	25
<i>amiodarone hcl</i>	35	ARISTADA INITIO	25
AMIODARONE HYDROCHLORIDE	35	<i>armodafinil</i>	71
<i>amitriptyline hcl</i>	12	ARMOUR THYROID	58
<i>amitriptyline hydrochloride</i>	12	ARNUITY ELLIPTA	68
AMJEVITA	61	ARRANON	16
<i>amlodipine besylate</i>	36	<i>arsenic trioxide</i>	17
<i>amlodipine besylate/benazepril hcl</i>	37	ARZERRA	22
<i>amlodipine besylate/benazepril hydrochloride</i>	37	ASCENIV	59
<i>amlodipine besylate/valsartan</i>	37	<i>ascomp/codeine</i>	2
<i>ammonium lactate</i>	42	ASENAPINE MALEATE SL	25
<i>amnestem</i>	42	<i>ashlyna</i>	53
<i>amoxapine</i>	12	<i>aspirin/dipyridamole</i>	34
<i>amoxicillin</i>	6	<i>aspirin/dipyridamole er</i>	34
<i>amoxicillin/clavulanate potassium</i>	6	ASTAGRAF XL	61
<i>amoxicillin/clavulanate potassium er</i>	6	<i>atazanavir</i>	28
<i>amphetamine/dextroamphetamine</i>	40	<i>atazanavir sulfate</i>	28
<i>amphotericin b</i>	13	<i>atenolol</i>	35
<i>amphotericin b liposome</i>	13	<i>atenolol/chlorthalidone</i>	37
<i>ampicillin</i>	6	ATGAM	59
<i>ampicillin sodium</i>	6	<i>atomoxetine</i>	40
<i>ampicillin/sulbactam</i>	6	<i>atomoxetine hydrochloride</i>	40
<i>ampicillin-sulbactam</i>	6	<i>atorvastatin calcium</i>	39
<i>anagrelide hydrochloride</i>	33	<i>atovaquone</i>	23
<i>anastrozole</i>	19	<i>atovaquone/proguanil hcl</i>	24
ANKTIVA	17	<i>atropine sulfate</i>	65
ANNOVERA	53	<i>atropine sulfate</i>	66
ANORO ELLIPTA	70	ATROVENT HFA	69
<i>apomorphine hydrochloride</i>	24	<i>aubra eq</i>	53
APONVIE	13	AUGMENTIN	6
<i>apraclonidine</i>	67	AUGTYRO	19
<i>aprepitant</i>	13	<i>aurovela 1.5/30</i>	53
<i>apri</i>	53	<i>aurovela 1/20</i>	53
APTIOM	10	<i>aurovela 24 fe</i>	53
APTIVUS	28	<i>aurovela fe 1.5/30</i>	53
ARALAST NP	50	<i>aurovela fe 1/20</i>	53
<i>aranelle</i>	53	AUVELITY	11
ARANESP ALBUMIN FREE	33	AVASTIN	22
		<i>aviane</i>	53

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AVONEX	41	BENLYSTA	62
AVONEX PEN	41	<i>benztropine mesylate</i>	24
AVSOLA	61	BERINERT	59
AVYCAZ	5	BESPONSA	22
<i>ayuna</i>	53	BESREMI	61
AYVAKIT	19	<i>betaine anhydrous</i>	50
<i>azacitidine</i>	17	<i>betamethasone dipropionate</i>	42
AZATHIOPRINE	61	<i>betamethasone dipropionate augmented</i>	42
<i>azelaic acid</i>	42	<i>betamethasone sodium</i>	52
<i>azelastine hcl</i>	67	<i>phosphate/betamethasone acetate</i>	
<i>azelastine hcl</i>	68	<i>betamethasone valerate</i>	42
<i>azelastine hydrochloride</i>	68	BETASERON	41
AZELEX	42	<i>betaxolol hcl</i>	36
<i>azithromycin</i>	7	<i>betaxolol hcl</i>	67
<i>aztreonam</i>	4	<i>bethanechol chloride</i>	51
<i>azurette</i>	53	BEVESPI AEROSPHERE	70
<i>bacitracin</i>	67	<i>bexarotene</i>	23
<i>bacitracin/polymyxin b</i>	66	BEXSERO	63
<i>baclofen</i>	26	BEYFORTUS	59
<i>balsalazide disodium</i>	64	<i>bicalutamide</i>	16
BALVERSA	19	BICILLIN C-R	6
<i>balziva</i>	53	BICILLIN L-A	6
BARACLUDGE	27	BIKTARVY	27
BAVENCIO	22	<i>bisoprolol fumarate</i>	36
BAXDELA	7	<i>bisoprolol fumarate/hydrochlorothiazide</i>	37
BCG VACCINE	62	BIVIGAM	59
BD INSULIN SYRINGE	65	<i>bleomycin sulfate</i>	17
SAFETYGLIDE/1ML/29G X 1/2"		BLINCYTO	22
B-D INSULIN SYRINGE ULTRAFINE	65	<i>blisovi 24 fe</i>	53
II/0.3ML/31G X 5/16"		<i>blisovi fe 1.5/30</i>	53
BD INSULIN SYRINGE ULTRA-	65	<i>blisovi fe 1/20</i>	53
FINE/0.5ML/30G X 12.7MM		BOOSTRIX	63
BD INSULIN SYRINGE ULTRA-	65	BORTEZOMIB	17
FINE/1ML/31G X 8MM		BOSULIF	19
BD PEN NEEDLE/ORIGINAL/ULTRA-	65	BOTOX	26
FINE/29G X 12.7MM		BRAFTOVI	19
BELEODAQ	19	BREO ELLIPTA	70
BELSOMRA	71	<i>breyrna</i>	70
<i>benazepril hcl</i>	34	BREZTRI AEROSPHERE	70
<i>benazepril hydrochloride</i>	34	<i>brielllyn</i>	53
<i>benazepril</i>	37	BRILINTA	34
<i>hydrochloride/hydrochlorothiazide</i>		<i>brimonidine tartrate</i>	68
<i>bendamustine hydrochloride</i>	15	<i>brimonidine tartrate/timolol maleate</i>	66
BENDEKA	15	BRIVIACT	8
BENLYSTA	60	<i>bromfenac</i>	67

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BROMFENAC SODIUM	67	<i>captopril</i>	34
<i>bromocriptine mesylate</i>	24	<i>carbamazepine</i>	10
BRONCHITOL	70	<i>carbamazepine er</i>	10
BRUKINSA	19	<i>carbidopa</i>	24
<i>budesonide</i>	64	<i>carbidopa/levodopa</i>	24
<i>budesonide</i>	68	<i>carbidopa/levodopa er</i>	24
<i>bumetanide</i>	38	<i>carbidopa/levodopa odt</i>	24
<i>buprenorphine</i>	1	<i>carbidopa/levodopa/entacapone</i>	24
<i>buprenorphine hcl</i>	3	<i>carboplatin</i>	15
<i>buprenorphine hcl/naloxone hcl</i>	3	<i>carglumic acid</i>	45
<i>buprenorphine hydrochloride/naloxone</i>	3	CARMUSTINE	15
<i>hydrochloride</i>		<i>carteolol hcl</i>	67
<i>bupropion hcl</i>	11	<i>cartia xt</i>	36
<i>bupropion hydrochloride</i>	11	<i>carvedilol</i>	36
<i>bupropion hydrochloride er (sr)</i>	4	<i>carvedilol phosphate er</i>	36
<i>bupropion hydrochloride er (sr)</i>	11	<i>caspofungin acetate</i>	13
<i>bupropion hydrochloride er (xl)</i>	11	CAYSTON	69
<i>bupirone hcl</i>	29	<i>cefaclor</i>	5
<i>bupirone hydrochloride</i>	29	<i>cefaclor er</i>	5
<i>busulfan</i>	15	<i>cefadroxil</i>	5
BUSULFEX	15	CEFAZOLIN	5
<i>butalbital/acetaminophen/caffeine</i>	40	<i>cefazolin sodium</i>	5
<i>butalbital/acetaminophen/caffeine/codeine</i>	2	<i>cefazolin sodium/dextrose</i>	5
<i>butalbital/aspirin/caffeine</i>	40	CEFAZOLIN/DEXTROSE	5
<i>butalbital/aspirin/caffeine/codeine</i>	2	<i>cefdinir</i>	6
<i>butorphanol tartrate</i>	2	CEFEPIME	6
CABENUVA	27	CEFEPIME HYDROCHLORIDE	6
<i>cabergoline</i>	58	CEFEPIME/DEXTROSE	6
CABLIVI	34	<i>cefixime</i>	6
CABOMETYX	19	CEFOTAXIME SODIUM	6
<i>caffeine citrate</i>	40	<i>cefotetan</i>	6
<i>calcipotriene</i>	43	<i>cefoxitin sodium</i>	6
<i>calcitonin salmon</i>	64	<i>cefpodoxime proxetil</i>	6
<i>calcitonin-salmon</i>	64	<i>cefprozil</i>	6
<i>calcitriol</i>	43	<i>ceftazidime</i>	6
<i>calcitriol</i>	64	<i>ceftriaxone in iso-osmotic dextrose</i>	6
<i>calcium acetate</i>	48	<i>ceftriaxone sodium</i>	6
CALQUENCE	19	<i>ceftriaxone/dextrose</i>	6
<i>camila</i>	57	<i>cefuroxime axetil</i>	6
<i>camrese</i>	53	<i>cefuroxime sodium</i>	6
<i>camrese lo</i>	53	<i>celecoxib</i>	1
<i>candesartan cilexetil</i>	34	<i>cephalexin</i>	6
<i>candesartan cilexetil/hydrochlorothiazide</i>	37	CERDELGA	50
CAPLYTA	25	CEREZYME	50
CAPRELSA	19	<i>cetirizine hydrochloride</i>	68

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<i>cevimeline hydrochloride</i>	41	<i>clindamycin phosphate</i>	4
<i>charlotte 24 fe</i>	54	<i>clindamycin phosphate</i>	44
<i>chateal eq</i>	54	<i>clindamycin phosphate/dextrose</i>	4
CHEMET	47	CLINIMIX 4.25%/DEXTROSE 10%	45
<i>chloramphenicol sodium succinate</i>	4	CLINIMIX 4.25%/DEXTROSE 5%	45
<i>chlordiazepoxide hcl</i>	30	CLINIMIX 5%/DEXTROSE 15%	45
<i>chlordiazepoxide hydrochloride</i>	30	CLINIMIX 5%/DEXTROSE 20%	45
<i>chlorhexidine gluconate</i>	42	CLINIMIX 6/5	45
<i>chloroquine phosphate</i>	24	CLINIMIX 8/10	45
<i>chlorothiazide sodium</i>	38	CLINIMIX 8/14	45
<i>chlorpromazine hcl</i>	24	CLINIMIX E 2.75%/DEXTROSE 5%	45
<i>chlorpromazine hydrochloride</i>	24	CLINIMIX E 4.25%/DEXTROSE 10%	45
<i>chlorthalidone</i>	38	CLINIMIX E 4.25%/DEXTROSE 5%	45
CHOLBAM	50	CLINIMIX E 5%/DEXTROSE 15%	45
<i>cholestyramine</i>	39	CLINIMIX E 5%/DEXTROSE 20%	45
<i>cholestyramine light</i>	39	CLINIMIX E 8/10	45
<i>chorionic gonadotropin</i>	52	CLINIMIX E 8/14	45
<i>ciclodan</i>	44	CLINISOL SF 15%	45
<i>ciclopirox</i>	44	CLINOLIPID	65
<i>ciclopirox nail lacquer</i>	44	<i>clobazam</i>	9
<i>ciclopirox olamine</i>	44	<i>clobetasol propionate</i>	43
<i>cidofovir</i>	26	<i>clobetasol propionate e</i>	42
<i>cilostazol</i>	34	<i>clobetasol propionate emollient</i>	43
CIMDUO	28	<i>clofarabine</i>	16
<i>cimetidine</i>	49	<i>clomipramine hydrochloride</i>	12
CIMZIA	62	<i>clonazepam</i>	9
CIMZIA STARTER KIT	62	<i>clonazepam odt</i>	9
<i>cinacalcet hydrochloride</i>	64	<i>clonidine</i>	34
CINRYZE	59	<i>clonidine hydrochloride</i>	34
CINVANTI	13	<i>clonidine hydrochloride</i>	40
<i>ciprofloxacin hcl</i>	7	<i>clonidine hydrochloride er</i>	40
<i>ciprofloxacin hydrochloride</i>	7	<i>clopidogrel</i>	34
<i>ciprofloxacin hydrochloride</i>	67	<i>clorazepate dipotassium</i>	30
<i>ciprofloxacin i.v.-in d5w</i>	7	<i>clotrimazole</i>	13
<i>cisplatin</i>	15	<i>clotrimazole/betamethasone dipropionate</i>	43
<i>citalopram hydrobromide</i>	11	<i>clozapine</i>	26
<i>cladribine</i>	16	<i>clozapine odt</i>	26
<i>claravis</i>	42	COARTEM	24
<i>clarithromycin</i>	7	CODEINE SULFATE	2
<i>clarithromycin er</i>	7	<i>colchicine</i>	14
<i>clindacin</i>	44	<i>colesevelam hydrochloride</i>	39
<i>clindacin etz pledgets</i>	4	<i>colestipol hcl</i>	39
<i>clindamycin hcl</i>	4	<i>colistimethate sodium</i>	4
<i>clindamycin hydrochloride</i>	4	COLUMVI	17
<i>clindamycin palmitate hydrochloride</i>	4	COMBIVENT RESPIMAT	70

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COMETRIQ	19	<i>dactinomycin</i>	17
COMPLERA	27	<i>dalfampridine er</i>	41
<i>compro</i>	12	<i>danazol</i>	53
<i>constulose</i>	48	<i>dantrolene sodium</i>	26
COPIKTRA	19	DANYELZA	22
CORLANOR	37	<i>dapsone</i>	15
COSELA	65	DAPTACEL	63
COSENTYX	60	<i>daptomycin</i>	4
COSENTYX SENSOREADY PEN	60	DAPTOMYCIN/SODIUM CHLORIDE	5
COSENTYX UNOREADY	60	DARIFENACIN HYDROBROMIDE ER	51
COTELLIC	19	<i>darunavir</i>	28
CREON	50	DARZALEX	22
CRESEMBA	13	DARZALEX FASPRO	22
CRINONE	57	<i>dasatinib</i>	19
<i>cromolyn sodium</i>	50	<i>dasetta 1/35</i>	54
<i>cromolyn sodium</i>	67	<i>dasetta 7/7/7</i>	54
<i>cromolyn sodium</i>	69	<i>daunorubicin hydrochloride</i>	17
<i>cryselle-28</i>	54	DAURISMO	20
CRYSVITA	50	<i>daysee</i>	54
CURITY ALL PURPOSE SPONGES	65	DAYVIGO	71
2"X2"		<i>deblitane</i>	57
CURITY GAUZE PADS 2"X2" 12 PLY	65	<i>decitabine</i>	17
CUVITRU	59	<i>deferasirox</i>	47
<i>cyclobenzaprine hydrochloride</i>	71	<i>deferiprone</i>	47
<i>cyclopentolate hcl</i>	66	<i>deferoxamine mesylate</i>	65
<i>cyclopentolate hydrochloride</i>	66	DELSTRIGO	27
CYCLOPHOSPHAMIDE	15	<i>delyla</i>	54
CYCLOPHOSPHAMIDE	15	<i>demeclocycline hcl</i>	8
MONOHYDRATE		<i>demeclocycline hydrochloride</i>	8
<i>cycloserine</i>	15	DENGVAXIA	63
<i>cyclosporine</i>	62	DEPO-ESTRADIOL	54
<i>cyclosporine</i>	66	DEPO-SUBQ PROVERA 104	57
<i>cyclosporine modified</i>	62	DESCOVY	28
<i>cyproheptadine hcl</i>	68	<i>desipramine hydrochloride</i>	12
<i>cyproheptadine hydrochloride</i>	68	<i>desloratadine</i>	68
CYRAMZA	22	<i>desmopressin acetate</i>	52
<i>cyred eq</i>	54	<i>desogestrel/ethinyl estradiol</i>	54
CYSTADROPS	66	<i>desonide</i>	43
CYSTAGON	50	<i>desoximetasone</i>	43
CYSTARAN	66	<i>desvenlafaxine er</i>	11
<i>cytarabine</i>	16	<i>dexamethasone</i>	52
<i>cytarabine aqueous</i>	16	DEXAMETHASONE INTENSOL	52
CYTOGAM	59	<i>dexamethasone sodium phosphate</i>	52
<i>dabigatran etexilate</i>	32	<i>dexamethasone sodium phosphate</i>	67
<i>dacarbazine</i>	15		

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DEXAMETHASONE SODIUM PHOSPHATE +RFID	52	DILANTIN INFATABS	10
<i>dexmethylphenidate hcl</i>	40	<i>diltiazem hcl</i>	37
<i>dexmethylphenidate hcl er</i>	40	<i>diltiazem hcl cd</i>	36
<i>dexmethylphenidate hydrochloride</i>	40	<i>diltiazem hcl er</i>	36
<i>dexmethylphenidate hydrochloride er</i>	40	<i>diltiazem hydrochloride</i>	37
<i>dexrazoxane</i>	23	<i>diltiazem hydrochloride er</i>	37
<i>dextroamphetamine sulfate</i>	40	<i>dilt-xr</i>	36
<i>dextroamphetamine sulfate er</i>	40	<i>dimenhydrinate</i>	12
<i>dextrose</i>	46	<i>dimethyl fumarate</i>	41
<i>dextrose 5%/electrolyte #48 viaflex</i>	45	<i>dimethyl fumarate starterpack</i>	41
<i>dextrose 10%</i>	45	<i>diphenhydramine hcl</i>	68
<i>dextrose 10%/sodium chloride 0.2%</i>	45	<i>diphenhydramine hydrochloride</i>	68
<i>dextrose 10%/sodium chloride 0.45%</i>	45	<i>diphenoxylate hydrochloride/atropine</i>	48
<i>dextrose 2.5%/sodium chloride 0.45%</i>	45	<i>sulfate</i>	
<i>dextrose 25%</i>	45	<i>diphenoxylate/atropine</i>	48
<i>dextrose 5%</i>	45	DIPHTHERIA/TETANUS TOXOIDS	63
<i>dextrose 5%/lactated ringers</i>	45	ADSORBED PEDIATRIC	
<i>dextrose 5%/sodium chloride 0.2%</i>	45	<i>disulfiram</i>	3
<i>dextrose 5%/sodium chloride 0.3%</i>	45	DIURIL	38
<i>dextrose 5%/sodium chloride 0.33%</i>	45	<i>divalproex sodium</i>	9
<i>dextrose 5%/sodium chloride 0.45%</i>	45	<i>divalproex sodium dr</i>	9
<i>dextrose 5%/sodium chloride 0.9%</i>	45	<i>divalproex sodium er</i>	9
<i>dextrose 50%</i>	46	<i>dobutamine hcl</i>	37
<i>dextrose/sodium chloride</i>	46	<i>dobutamine hcl/d5w</i>	37
DIACOMIT	9	<i>dobutamine hydrochloride/dextrose 5%</i>	37
<i>diazepam</i>	30	DOCETAXEL	17
<i>diazepam intensol</i>	30	<i>dofetilide</i>	35
<i>diazepam rectal gel</i>	9	<i>dolishale</i>	54
<i>diazoxide</i>	31	<i>donepezil hcl</i>	10
<i>dichlorphenamide</i>	50	<i>donepezil hydrochloride</i>	10
<i>diclofenac sodium</i>	1	<i>donepezil hydrochloride odt</i>	10
<i>diclofenac sodium</i>	43	<i>dopamine hydrochloride</i>	37
<i>diclofenac sodium</i>	67	<i>dopamine hydrochloride/dextrose</i>	37
<i>diclofenac sodium dr</i>	1	<i>dopamine/d5w</i>	37
<i>diclofenac sodium er</i>	1	DOPTELET	34
<i>diclofenac sodium/misoprostol</i>	1	<i>dorzolamide hcl/timolol maleate</i>	66
<i>dicloxacillin sodium</i>	6	<i>dorzolamide hydrochloride</i>	68
<i>dicyclomine hcl</i>	48	<i>dorzolamide hydrochloride/timolol maleate</i>	66
<i>dicyclomine hydrochloride</i>	48	<i>pf</i>	
DIFICID	7	<i>dotti</i>	54
<i>digox</i>	35	DOVATO	27
DIGOXIN	35	<i>doxazosin</i>	51
<i>dihydroergotamine mesylate</i>	14	<i>doxazosin mesylate</i>	51
DILANTIN	10	<i>doxepin hcl</i>	12
		<i>doxepin hydrochloride</i>	12

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<i>doxepin hydrochloride</i>	71	<i>elixophyllin</i>	69
<i>doxercalciferol</i>	64	ELMIRON	52
<i>doxorubicin hcl</i>	18	ELREXFIO	18
<i>doxorubicin hydrochloride</i>	18	<i>eluryng</i>	54
<i>doxorubicin hydrochloride liposomal</i>	18	ELZONRIS	18
<i>doxy 100</i>	8	EMCYT	16
<i>doxycycline</i>	8	EMEND	13
<i>doxycycline hyclate</i>	8	EMGALITY	14
<i>doxycycline hyclate</i>	42	EMPAVELI	61
<i>doxycycline monohydrate</i>	8	EMPLICITI	22
DRIZALMA SPRINKLE	11	EMSAM	11
<i>dronabinol</i>	13	<i>emtricitabine</i>	28
<i>droperidol</i>	12	<i>emtricitabine/tenofovir disoproxil</i>	28
DROPLET PEN NEEDLES 29GX10MM	65	<i>emtricitabine/tenofovir disoproxil fumarate</i>	28
<i>drospirenone/ethinyl estradiol</i>	54	EMTRIVA	28
<i>drospirenone/ethinyl estradiol/levomefolate</i>	54	<i>emzahh</i>	57
<i>calcium</i>		<i>enalapril maleate</i>	34
DROXIA	17	<i>enalapril maleate/hydrochlorothiazide</i>	37
<i>droxidopa</i>	34	<i>enalaprilat</i>	34
DULERA	70	ENBREL	62
<i>duloxetine hydrochloride</i>	11	ENBREL MINI	62
DUPIXENT	60	ENBREL SURECLICK	62
<i>duramorph</i>	2	ENDARI	50
<i>dutasteride</i>	51	<i>endocet</i>	2
DYSPORT	26	ENGERIX-B	63
EASY COMFORT INSULIN	65	ENHERTU	22
SYRINGE/1ML/32GX5/16"		<i>enilloring</i>	54
EASY COMFORT INSULIN	65	<i>enoxaparin sodium</i>	32
SYRINGES/0.5ML/32GX5/16"		<i>enpresse-28</i>	54
<i>econazole nitrate</i>	13	<i>enskyce</i>	54
EDURANT	27	<i>entacapone</i>	24
<i>efavirenz</i>	27	<i>entecavir</i>	27
<i>efavirenz/emtricitabine/tenofovir disoproxil</i>	27	ENTRESTO	37
<i>fumarate</i>		<i>enulose</i>	48
<i>efavirenz/lamivudine/tenofovir disoproxil</i>	27	EPCLUSA	27
<i>fumarate</i>		EPIDIOLEX	8
ELAHERE	22	<i>epinephrine</i>	69
ELAPRASE	50	<i>epitol</i>	10
ELELYSO	50	EPKINLY	18
ELEPSIA XR	8	<i>eplerenone</i>	39
ELIGARD	58	EPOGEN	33
<i>elinest</i>	54	<i>epoprostenol sodium</i>	70
ELIQUIS	32	EPRONTIA	8
ELIQUIS STARTER PACK	32	ERBITUX	22

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ERGOLOID MESYLATES	10	EXKIVITY	20
ERGOMAR	14	EXONDYS 51	50
ERGOTAMINE TARTRATE/CAFFEINE	14	EXSERVAN	41
<i>eribulin mesylate</i>	18	EXTAVIA	41
ERIVEDGE	20	<i>ezetimibe</i>	39
ERLEADA	16	FABRAZYME	50
<i>erlotinib hydrochloride</i>	20	<i>falmina</i>	54
<i>errin</i>	57	<i>famciclovir</i>	29
<i>ertapenem sodium</i>	7	<i>famotidine</i>	49
<i>ery</i>	44	<i>famotidine premixed</i>	49
ERYTHROCIN LACTOBIONATE	7	FANAPT	25
<i>erythrocin stearate</i>	7	FANAPT TITRATION PACK	25
<i>erythromycin</i>	44	FARXIGA	39
<i>erythromycin</i>	67	FASLODEX	16
<i>erythromycin base</i>	7	<i>febuxostat</i>	14
<i>erythromycin dr</i>	7	<i>felbamate</i>	8
<i>erythromycin ethylsuccinate</i>	7	<i>felodipine er</i>	36
<i>erythromycin lactobionate</i>	7	FEMRING	54
<i>escitalopram oxalate</i>	11	<i>fenofibrate</i>	38
<i>esmolol hcl</i>	36	<i>fenofibrate micronized</i>	38
<i>esmolol hydrochloride in sodium chloride</i>	36	<i>fenofibric acid</i>	38
<i>esmolol hydrochloride in sodium chloride</i>	36	<i>fenofibric acid dr</i>	39
<i>double strength</i>		<i>fenopropfen calcium</i>	1
<i>esmolol hydrochloride/sodium chloride</i>	36	<i>fentanyl</i>	1
<i>esomeprazole magnesium</i>	49	<i>fentanyl citrate oral transmucosal</i>	2
<i>estarylla</i>	54	FERRIPROX	47
ESTRADIOL	54	FERRIPROX TWICE-A-DAY	47
<i>estradiol valerate</i>	54	<i>fesoterodine fumarate er</i>	51
<i>estradiol/norethindrone acetate</i>	54	FETROJA	6
ESTRING	54	FETZIMA	11
<i>ethacrynate sodium</i>	38	FETZIMA TITRATION PACK	11
<i>ethambutol hydrochloride</i>	15	<i>finasteride</i>	51
<i>ethosuximide</i>	9	<i> fingolimod hydrochloride</i>	41
<i>ethynodiol diacetate/ethinyl estradiol</i>	54	FINTEPLA	8
<i>etodolac er</i>	1	<i>finzala</i>	54
<i>etonogestrel/ethinyl estradiol</i>	54	FIRMAGON	58
ETOPOPHOS	19	<i>flac</i>	68
<i>etoposide</i>	19	<i>flavoxate hcl</i>	51
<i>etravirine</i>	27	FLEBOGAMMA DIF	60
<i>euthyrox</i>	58	<i>flecainide acetate</i>	35
<i>everolimus</i>	20	FLOXURIDINE	17
<i>everolimus</i>	62	<i>fluconazole</i>	13
EVOMELA	15	<i>fluconazole in nacl</i>	13
EVOTAZ	29	<i>fluconazole in sodium chloride</i>	13
<i>exemestane</i>	19	<i>flucytosine</i>	13

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Drug Name	Page #	Drug Name	Page #
FLUDARABINE PHOSPHATE	20	FYARRO	20
<i>fludrocortisone acetate</i>	52	<i>fyavolv</i>	54
<i>flunisolide</i>	68	FYCOMPA	8
<i>fluocinolone acetonide</i>	43	FYLNETRA	33
<i>fluocinolone acetonide</i>	68	<i>gabapentin</i>	9
<i>fluocinolone acetonide body</i>	43	GABLOFEN	26
<i>fluocinolone acetonide ear drops</i>	68	GALAFOLD	50
<i>fluocinolone acetonide scalp</i>	43	<i>galantamine hydrobromide</i>	10
<i>fluocinolone acetonide topical</i>	43	<i>galantamine hydrobromide er</i>	10
<i>fluocinonide</i>	43	<i>gallifrey</i>	57
<i>fluoride</i>	46	GAMASTAN	60
<i>fluorouracil</i>	17	GAMMAGARD LIQUID	60
FLUOROURACIL	43	GAMMAGARD S/D IGA LESS THAN	60
<i>fluoxetine dr</i>	11	1MCG/ML	
<i>fluoxetine hydrochloride</i>	11	GAMMAKED	60
<i>fluphenazine decanoate</i>	24	GAMMAPLEX	60
<i>fluphenazine hcl</i>	24	GAMUNEX-C	60
<i>fluphenazine hydrochloride</i>	25	<i>ganciclovir</i>	26
<i>flurazepam hydrochloride</i>	71	GARDASIL 9	63
<i>flurbiprofen</i>	1	<i>gatifloxacin</i>	67
<i>flurbiprofen sodium</i>	67	GATTEX	49
<i>fluticasone propionate</i>	43	<i>gavilyte-c</i>	49
<i>fluticasone propionate</i>	68	<i>gavilyte-g</i>	49
<i>fluticasone propionate/salmeterol</i>	71	<i>gavilyte-n/ flavor pack</i>	49
<i>fluticasone propionate/salmeterol diskus</i>	71	GAVRETO	20
<i>fluvoxamine maleate</i>	11	GAZYVA	22
<i>fluvoxamine maleate er</i>	11	<i>gefitinib</i>	20
FOLOTYN	17	<i>gemcitabine hydrochloride</i>	17
<i>fomepizole</i>	65	<i>gemfibrozil</i>	39
<i>fondaparinux sodium</i>	32	<i>gemmily</i>	54
FORTEO	64	GEMTESA	51
<i>fosamprenavir calcium</i>	29	<i>generlac</i>	48
<i>fosaprepitant dimeglumine</i>	13	<i>gengraf</i>	62
<i>fosfomycin tromethamine</i>	5	<i>gentamicin sulfate</i>	4
<i>fosinopril sodium</i>	34	<i>gentamicin sulfate</i>	67
<i>fosinopril sodium/hydrochlorothiazide</i>	38	<i>gentamicin sulfate pediatric</i>	4
<i>fosphenytoin sodium</i>	10	<i>gentamicin sulfate/0.9% sodium chloride</i>	4
FOSRENOL	48	GENVOYA	27
FOTIVDA	20	GILENYA	41
FRAGMIN	32	GILOTRIF	20
FRUZAQLA	20	GLASSIA	50
FULPHILA	33	<i>glatiramer acetate</i>	41
<i>fulvestrant</i>	16	<i>glatopa</i>	41
<i>furosemide</i>	38	GLEOSTINE	15
FUZEON	28	<i>glimepiride</i>	30

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GLIPIZIDE	30	HEPLISAV-B	63
<i>glipizide er</i>	30	HERCEPTIN	22
<i>glipizide xl</i>	30	HERCEPTIN HYLECTA	22
<i>glipizide/metformin hydrochloride</i>	30	HERZUMA	22
GLOBAL ALCOHOL PREP EASE PADS	65	HETLIOZ LQ	71
GLUCAGEN HYPOKIT	31	HIBERIX	63
GLUCAGON EMERGENCY KIT	31	HIZENTRA	60
GLUCAGON EMERGENCY KIT FOR	31	HUMALOG	31
LOW BLOOD SUGAR		HUMALOG JUNIOR KWIKPEN	31
<i>glycopyrrolate</i>	48	HUMALOG KWIKPEN	31
<i>glydo</i>	3	HUMALOG MIX 50/50	31
GLYXAMBI	30	HUMALOG MIX 50/50 KWIKPEN	32
<i>granisetron hcl</i>	13	HUMALOG MIX 75/25	32
<i>granisetron hydrochloride</i>	13	HUMALOG MIX 75/25 KWIKPEN	32
GRANIX	33	<i>humulin 70/30</i>	32
<i>griseofulvin microsize</i>	13	HUMULIN 70/30 KWIKPEN	32
<i>griseofulvin ultramicrosize</i>	13	<i>humulin n</i>	32
GVOKE HYPOPEN 2-PACK	31	HUMULIN N KWIKPEN	32
GVOKE KIT	31	<i>humulin r</i>	32
GVOKE PFS	31	HUMULIN R U-500 (CONCENTRATED)	32
HADLIMA	62	HUMULIN R U-500 KWIKPEN	32
HADLIMA PUSHTOUCH	62	<i>hydralazine hcl</i>	40
HAEGARDA	59	<i>hydralazine hydrochloride</i>	40
<i>hailey 1.5/30</i>	54	<i>hydrochlorothiazide</i>	38
<i>hailey 24 fe</i>	54	<i>hydrocodone bitartrate/acetaminophen</i>	2
<i>hailey fe 1.5/30</i>	54	<i>hydrocodone/acetaminophen</i>	2
<i>hailey fe 1/20</i>	54	<i>hydrocodone/ibuprofen</i>	2
HALAVEN	18	<i>hydrocortisone</i>	43
<i>halobetasol propionate</i>	43	<i>hydrocortisone</i>	52
<i>haloperidol</i>	25	<i>hydrocortisone</i>	64
<i>haloperidol decanoate</i>	25	<i>hydrocortisone butyrate</i>	43
<i>haloperidol lactate</i>	25	<i>hydrocortisone butyrate (lipid)</i>	43
HARVONI	27	<i>hydrocortisone butyrate (lipophilic)</i>	43
HAVRIX	63	<i>hydromorphone hcl</i>	2
<i>heather</i>	57	<i>hydromorphone hydrochloride</i>	2
HEMANGEOL	36	<i>hydroxychloroquine sulfate</i>	24
HEPAGAM B	60	<i>hydroxyurea</i>	17
<i>heparin sodium</i>	33	<i>hydroxyzine hcl</i>	68
<i>heparin sodium/d5w</i>	32	<i>hydroxyzine hydrochloride</i>	68
<i>heparin sodium/dextrose</i>	32	<i>hydroxyzine pamoate</i>	68
<i>heparin sodium/nacl 0.45%</i>	32	HYPERHEP B	60
<i>heparin sodium/sodium chloride</i>	33	HYPERRHO S/D	60
<i>heparin sodium/sodium chloride 0.9%</i>	33	HYPERRHO S/D MINI-DOSE	60
<i>heparin sodium/sodium chloride 0.9%</i>	33	HYQVIA	60
<i>premix</i>		<i>ibandronate sodium</i>	64

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IBRANCE	18	<i>ipratropium bromide</i>	69
IBRANCE	20	<i>ipratropium bromide/albuterol sulfate</i>	71
<i>ibu</i>	1	<i>irbesartan</i>	34
<i>ibuprofen</i>	1	<i>irbesartan/hydrochlorothiazide</i>	38
<i>icatibant acetate</i>	59	<i>irinotecan hydrochloride</i>	19
<i>iclevia</i>	54	ISENTRESS	27
ICLUSIG	20	ISENTRESS HD	27
<i>icosapent ethyl</i>	39	<i>isibloom</i>	54
<i>idarubicin hcl</i>	18	ISOLYTE-P/DEXTROSE 5%	46
<i>idarubicin hydrochloride</i>	18	ISOLYTE-S	46
IDHIFA	20	ISOLYTE-S PH 7.4	46
IFOSFAMIDE	16	<i>isoniazid</i>	15
ILARIS	61	<i>isoproterenol hydrochloride</i>	69
<i>imatinib mesylate</i>	20	<i>isosorbide dinitrate</i>	39
IMBRUVICA	20	<i>isosorbide dinitrate/hydralazine</i>	38
IMDELLTRA	18	<i>hydrochloride</i>	
IMFINZI	22	<i>isosorbide mononitrate</i>	39
<i>imipenem/cilastatin</i>	7	<i>isosorbide mononitrate er</i>	39
<i>imipramine hcl</i>	12	<i>isotonic gentamicin</i>	4
<i>imipramine hydrochloride</i>	12	<i>isotretinoin</i>	42
<i>imipramine pamoate</i>	12	<i>isradipine</i>	36
<i>imiquimod</i>	44	ISTODAX	18
IMJUDO	22	ISTURISA	52
IMOVAX RABIES (H.D.C.V.)	63	<i>itraconazole</i>	13
IMPAVIDO	5	<i>ivabradine hydrochloride</i>	38
IMVEXXY MAINTENANCE PACK	54	<i>ivermectin</i>	23
IMVEXXY STARTER PACK	54	<i>ivermectin</i>	44
<i>incassia</i>	57	IWILFIN	18
INCRELEX	52	IXCHIQ	63
<i>indapamide</i>	38	IXEMPRA KIT	18
INFANRIX	63	IXIARO	63
INFLECTRA	62	<i>jaimiess</i>	54
<i>infliximab</i>	62	JAKAFI	20
INGREZZA	41	<i>jantoven</i>	33
INLYTA	20	JANUMET	30
INQOVI	20	JANUMET XR	31
INREBIC	18	JANUVIA	31
INTELENCE	27	JARDIANCE	39
INTRALIPID	65	<i>jasmiel</i>	54
<i>introvale</i>	54	JAYPIRCA	20
INVEGA HAFYERA	25	JEMPERLI	22
INVEGA SUSTENNA	25	<i>jencycla</i>	57
INVEGA TRINZA	25	JENTADUETO	31
IONOSOL-MB/DEXTROSE 5%	46	JENTADUETO XR	31
IPOL INACTIVATED IPV	63	JEVTANA	18

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<i>jinteli</i>	54	KISQALI FEMARA 200 DOSE	18
<i>jolessa</i>	55	KISQALI FEMARA 400 DOSE	18
<i>joyeaux</i>	55	KISQALI FEMARA 600 DOSE	18
<i>juleber</i>	55	<i>klayesta</i>	13
JULUCA	27	<i>klor-con 10</i>	46
<i>junel 1.5/30</i>	55	<i>klor-con 8</i>	46
<i>junel 1/20</i>	55	<i>klor-con m10</i>	46
<i>junel fe 1.5/30</i>	55	<i>klor-con m15</i>	46
<i>junel fe 1/20</i>	55	<i>klor-con m20</i>	46
<i>junel fe 24</i>	55	KOSELUGO	20
JUXTAPID	39	<i>kourzeq</i>	42
JYLAMVO	62	KRAZATI	20
JYNARQUE	47	KRISTALOSE	48
JYNNEOS	63	KRYSTEXXA	14
KADCYLA	22	<i>kurvelo</i>	55
<i>kaitlib fe</i>	55	KYPROLIS	19
KALBITOR	59	<i>labetalol hydrochloride</i>	36
<i>kalliga</i>	55	<i>lacosamide</i>	10
KALYDECO	69	<i>lactated ringers irrigation</i>	65
KANJINTI	22	<i>lactulose</i>	48
KANUMA	50	LAGEVRIO	29
KAPSPARGO SPRINKLE	36	<i>lamivudine</i>	27
<i>kariva</i>	55	<i>lamivudine</i>	28
<i>kcl 0.075%/d5w/nacl 0.45%</i>	46	<i>lamivudine/zidovudine</i>	28
<i>kcl 0.15%/d5w/nacl 0.2%</i>	46	<i>lamotrigine</i>	8
<i>kcl 0.15%/d5w/nacl 0.225%</i>	46	<i>lamotrigine er</i>	8
<i>kcl 0.15%/d5w/nacl 0.45%</i>	46	<i>lamotrigine starter kit/blue</i>	8
<i>kcl 0.15%/d5w/nacl 0.9%</i>	46	<i>lamotrigine starter kit/green</i>	8
<i>kcl 0.3%/d5w/nacl 0.45%</i>	46	<i>lamotrigine starter kit/orange</i>	8
<i>kcl 0.3%/d5w/nacl 0.9%</i>	46	<i>lamotrigine titration</i>	8
<i>kelnor 1/35</i>	55	LANOXIN PEDIATRIC	35
<i>kelnor 1/50</i>	55	LANREOTIDE ACETATE	58
<i>kemoplat</i>	16	<i>lansoprazole</i>	49
KEPIVANCE	42	<i>lanthanum carbonate</i>	48
KERENDIA	39	LANTUS	32
<i>ketoconazole</i>	13	LANTUS SOLOSTAR	32
<i>ketorolac tromethamine</i>	1	<i>lapatinib ditosylate</i>	20
<i>ketorolac tromethamine</i>	67	<i>larin 1.5/30</i>	55
KEYTRUDA	22	<i>larin 1/20</i>	55
KIMMTRAK	18	<i>larin 24 fe</i>	55
KIMYRSA	5	<i>larin fe 1.5/30</i>	55
KINERET	61	<i>larin fe 1/20</i>	55
KINRIX	63	<i>latanoprost</i>	68
<i>kionex</i>	48	<i>layolis fe</i>	55
KISQALI	20	LAZCLUZE	18

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LEDIPASVIR/SOFOSBUVIR	27	lidocaine hcl	3
<i>leena</i>	55	lidocaine hcl	35
<i>leflunomide</i>	62	lidocaine hcl	42
LEMTRADA	61	lidocaine hcl in d5w	35
<i>lenalidomide</i>	16	lidocaine hcl jelly	3
LENVIMA 10 MG DAILY DOSE	20	lidocaine hcl viscous	42
LENVIMA 12MG DAILY DOSE	20	lidocaine hcl/dextrose	35
LENVIMA 14 MG DAILY DOSE	20	lidocaine hydrochloride	3
LENVIMA 18 MG DAILY DOSE	20	lidocaine hydrochloride viscous	42
LENVIMA 20 MG DAILY DOSE	20	lidocaine viscous	42
LENVIMA 24 MG DAILY DOSE	20	lidocaine/prilocaine	3
LENVIMA 4 MG DAILY DOSE	20	LILETTA	57
LENVIMA 8 MG DAILY DOSE	20	lincomycin hcl	5
<i>lessina</i>	55	lincomycin hydrochloride	5
<i>letrozole</i>	19	<i>linezolid</i>	5
<i>leucovorin calcium</i>	18	LINZESS	48
LEUKERAN	16	LIORESAL INTRATHECAL	26
LEUPROLIDE ACETATE	58	LIOTHYRONINE SODIUM	58
<i>levalbuterol hcl</i>	69	<i>lisinopril</i>	34
<i>levalbuterol hydrochloride</i>	69	<i>lisinopril/hydrochlorothiazide</i>	38
<i>levalbuterol tartrate hfa</i>	69	<i>lithium</i>	30
<i>levetiracetam</i>	8	<i>lithium carbonate</i>	30
<i>levetiracetam er</i>	8	<i>lithium carbonate er</i>	30
<i>levetiracetam/sodium chloride</i>	8	LITHOSTAT	52
<i>levobunolol hcl</i>	67	LIVTENCITY	26
<i>levocarnitine</i>	65	LO LOESTRIN FE	55
<i>levocetirizine dihydrochloride</i>	68	<i>lofedidine hydrochloride</i>	3
LEVOFLOXACIN	7	<i>lojaimiess</i>	55
<i>levofloxacin</i>	67	LOKELMA	48
<i>levofloxacin in d5w</i>	7	LONSURF	18
<i>levoleucovorin</i>	18	<i>loperamide hcl</i>	48
<i>levonest</i>	55	<i>lopinavir/ritonavir</i>	29
<i>levonorgestrel and ethinyl estradiol</i>	55	LOQTORZI	22
<i>levonorgestrel/ethinyl estradiol</i>	55	<i>lorazepam</i>	30
<i>levonorgestrel/ethinyl estradiol/ferrous</i>	55	LORBRENA	20
<i>bisglycinate</i>		<i>loryna</i>	55
<i>levora 0.15/30-28</i>	55	<i>losartan potassium</i>	34
<i>levo-t</i>	58	<i>losartan potassium/hydrochlorothiazide</i>	38
<i>levothyroxine sodium</i>	58	<i>loteprednol etabonate</i>	67
<i>levoxyl</i>	58	<i>lovastatin</i>	39
LEXIVA	29	<i>low-ogestrel</i>	55
<i>l-glutamine</i>	50	<i>loxapine</i>	25
LIBERVANT	9	<i>lo-zumandimine</i>	55
LIBTAYO	22	LUBIPROSTONE	48
<i>lidocaine</i>	3	LUCEMYRA	4

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LUMAKRAS	20	<i>memantine hydrochloride</i>	11
LUMIGAN	68	<i>memantine hydrochloride er</i>	11
LUMIZYME	50	MENACTRA	63
LUNSUMIO	22	MENQUADFI	63
LUPKYNIS	62	MENVEO	63
LUPRON DEPOT (1-MONTH)	59	<i>meprobamate</i>	29
LUPRON DEPOT (3-MONTH)	59	<i>mercaptopurine</i>	17
LUPRON DEPOT (4-MONTH)	59	<i>meropenem</i>	7
LUPRON DEPOT (6-MONTH)	59	MEROPENEM/SODIUM CHLORIDE	7
LUPRON DEPOT-PED (1-MONTH)	59	<i>merzee</i>	55
LUPRON DEPOT-PED (3-MONTH)	59	<i>mesalamine</i>	64
LUPRON DEPOT-PED (6-MONTH)	52	<i>mesalamine dr</i>	64
<i>lurasidone hydrochloride</i>	25	<i>mesalamine er</i>	64
<i>lutra</i>	55	<i>mesna</i>	23
LYBALVI	25	MESNEX	23
<i>lyleq</i>	57	<i>metformin hydrochloride</i>	31
<i>lyllana</i>	55	<i>metformin hydrochloride er</i>	31
LYNPARZA	20	<i>methadone hcl</i>	1
LYSODREN	18	<i>methadone hydrochloride</i>	1
LYTGOBI	20	<i>methadone hydrochloride intensol</i>	1
<i>lyza</i>	57	<i>methadose</i>	1
MAGNESIUM SULFATE	46	<i>methadose sugar-free</i>	1
<i>magnesium sulfate in d5w</i>	46	<i>methazolamide</i>	68
<i>magnesium sulfate/dextrose</i>	46	<i>methenamine hippurate</i>	5
<i>malathion</i>	44	<i>methergine</i>	65
<i>maraviroc</i>	28	<i>methimazole</i>	59
MARGENZA	22	<i>methocarbamol</i>	71
<i>marlissa</i>	55	<i>methotrexate</i>	62
MARPLAN	11	<i>methotrexate sodium</i>	62
MATULANE	16	<i>methoxsalen</i>	44
MAVENCLAD	41	<i>methscopolamine bromide</i>	49
MAVYRET	27	METHSUXIMIDE	9
MAYZENT	41	<i>methylergonovine maleate</i>	65
MAYZENT STARTER PACK	41	<i>methylphenidate hydrochloride</i>	40
<i>meclizine hcl</i>	12	<i>methylphenidate hydrochloride cd</i>	40
<i>meclofenamate sodium</i>	1	<i>methylphenidate hydrochloride er</i>	40
<i>medroxyprogesterone acetate</i>	57	<i>methylprednisolone</i>	52
<i>mefenamic acid</i>	1	<i>methylprednisolone acetate</i>	52
<i>mefloquine hcl</i>	24	<i>methylprednisolone dose pack</i>	52
<i>megestrol acetate</i>	57	<i>methylprednisolone sodium succinate</i>	52
MEKINIST	20	<i>methylprednisolone sodiumsuccinate</i>	52
MEKTOVI	21	<i>metoclopramide hcl</i>	49
<i>meloxicam</i>	1	<i>metoclopramide hydrochloride</i>	49
<i>melphalan hydrochloride</i>	16	<i>metoclopramide odt</i>	49
<i>memantine hcl titration pak</i>	10	<i>metolazone</i>	38

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<i>metoprolol succinate er</i>	36	<i>montelukast sodium</i>	69
<i>metoprolol tartrate</i>	36	<i>morphine sulfate</i>	3
<i>metoprolol/hydrochlorothiazide</i>	38	<i>morphine sulfate er</i>	1
<i>metronidazole</i>	5	MOUNJARO	31
<i>metronidazole</i>	42	MOVANTIK	48
<i>metronidazole vaginal</i>	5	<i>moxifloxacin hydrochloride/sodium</i>	7
<i>metirosine</i>	38	<i>hydrochloride</i>	
<i>mexiletine hcl</i>	35	<i>moxifloxacin hydrochloride</i>	7
MIACALCIN	64	<i>moxifloxacin hydrochloride</i>	67
<i>mibelas 24 fe</i>	55	MOZOBIL	33
<i>micafungin</i>	13	MRESVIA	63
<i>miconazole 3</i>	13	MULPLETA	33
MICRHOGAM ULTRA-FILTERED PLUS	60	MULTAQ	35
<i>microgestin 1.5/30</i>	55	<i>multiple electrolytes injection type 1</i>	46
<i>microgestin 1/20</i>	55	<i>mupirocin</i>	44
<i>microgestin 24 fe</i>	55	<i>mutamycin</i>	18
<i>microgestin fe 1.5/30</i>	55	MVASI	22
<i>microgestin fe 1/20</i>	55	MYCOPHENOLATE MOFETIL	62
<i>midazolam hcl</i>	30	<i>mycophenolic acid dr</i>	62
<i>midazolam hydrochloride</i>	30	MYLOTARG	23
<i>midodrine hcl</i>	34	MYOBLOC	26
<i>mifepristone</i>	59	MYRBETRIQ	51
MIGERGOT	14	NABI-HB	60
<i>miglitol</i>	31	<i>nabumetone</i>	1
<i>miglustat</i>	50	<i>nadolol</i>	36
<i>mili</i>	55	NAFCILLIN	6
<i>milrinone lactate in dextrose</i>	38	<i>nafcillin sodium</i>	6
<i>mimvey</i>	55	<i>naftifine hcl</i>	13
MINOCIN	8	<i>naftifine hydrochloride</i>	13
<i>minocycline hcl</i>	8	NAGLAZYME	50
<i>minocycline hydrochloride</i>	8	<i>nalbuphine hydrochloride</i>	3
<i>minoxidil</i>	40	<i>naloxone hcl</i>	4
<i>mirtazapine</i>	11	<i>naloxone hydrochloride</i>	4
<i>mirtazapine odt</i>	11	<i>naltrexone hcl</i>	3
<i>misoprostol</i>	49	NAMZARIC	10
<i>mitomycin</i>	18	<i>naproxen</i>	1
<i>mitoxantrone hcl</i>	41	<i>naproxen sodium</i>	1
M-M-R II	63	NATACYN	67
MODAFINIL	71	NATAZIA	56
<i>moexipril hcl</i>	35	<i>nateglinide</i>	31
MOLINDONE HYDROCHLORIDE	25	NAYZILAM	9
<i>mometasone furoate</i>	43	<i>nebivolol</i>	36
<i>mondoxyne nl</i>	8	<i>nebivolol hydrochloride</i>	36
MONJUVI	22	<i>necon 0.5/35-28</i>	56
<i>mono-lynyah</i>	56	<i>nefazodone hydrochloride</i>	11

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<i>neomycin sulfate</i>	4	<i>nitroglycerin transdermal</i>	39
<i>neomycin/bacitracin/polymyxin</i>	66	NIVA THYROID	58
<i>neomycin/polymyxin b sulfates</i>	4	NIVESTYM	33
<i>neomycin/polymyxin/bacitracin/hydrocortisone</i>	66	<i>nizatidine</i>	49
<i>neomycin/polymyxin/dexamethasone</i>	66	<i>nora-be</i>	57
<i>neomycin/polymyxin/gramicidin</i>	66	NORDITROPIN FLEXPEN	52
<i>neomycin/polymyxin/hc</i>	68	<i>norelgestromin/ethinyl estradiol</i>	56
<i>neomycin/polymyxin/hydrocortisone</i>	66	<i>norepinephrine bitartrate</i>	38
<i>neomycin/polymyxin/hydrocortisone</i>	68	<i>norethindrone</i>	58
<i>neo-polycin</i>	66	<i>norethindrone & ethinyl estradiol ferrous fumarate</i>	56
<i>neo-polycin hc</i>	66	<i>norethindrone acetate</i>	57
NERLYNX	21	<i>norethindrone acetate/ethinyl estradiol</i>	56
NESINA	31	<i>norethindrone acetate/ethinyl estradiol/ferrous fumarate</i>	56
NEULASTA	33	<i>norethindrone/ethinyl estradiol/ferrous fumarate</i>	56
NEULASTA ONPRO KIT	33	<i>norgestimate/ethinyl estradiol</i>	56
NEUPOGEN	33	<i>norlyroc</i>	58
<i>nevirapine</i>	27	NORMOSOL-M/D5W	46
<i>nevirapine er</i>	28	NORMOSOL-R	46
NEXPLANON	57	<i>nortrel 0.5/35 (28)</i>	56
NEXTERONE	35	<i>nortrel 1/35</i>	56
NEXTSTELLIS	56	<i>nortrel 7/7/7</i>	56
<i>niacin</i>	39	<i>nortriptyline hcl</i>	12
<i>niacin er</i>	39	<i>nortriptyline hydrochloride</i>	12
<i>niacor</i>	39	NORVIR	29
<i>nicardipine hcl</i>	36	NOVAREL	52
NICARDIPINE HYDROCHLORIDE	36	NOVOLOG	32
NICARDIPINE HYDROCHLORIDE/SODIUM CHLORIDE	36	NOVOLOG FLEXPEN	32
NICOTROL INHALER	4	NOVOLOG FLEXPEN RELION	32
<i>nifedipine er</i>	36	NOVOLOG MIX 70/30	32
<i>nikki</i>	56	NOVOLOG MIX 70/30 PREFILLED	32
<i>nilutamide</i>	16	FLEXPEN	32
<i>nimodipine</i>	36	NOVOLOG MIX 70/30 PREFILLED	32
NINLARO	21	FLEXPEN RELION	32
<i>nitazoxanide</i>	24	NOVOLOG MIX 70/30 RELION	32
<i>nitisinone</i>	50	NOVOLOG PENFILL	32
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<i>nitrofurantoin macrocrystals</i>	5	NOXAFIL	13
<i>nitrofurantoin monohydrate</i>	5	<i>np thyroid 120</i>	58
<i>nitrofurantoin monohydrate/macrocrystals</i>	5	<i>np thyroid 15</i>	58
<i>nitroglycerin</i>	39	<i>np thyroid 30</i>	58
NITROGLYCERIN	49	<i>np thyroid 60</i>	58

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NPLATE	33	OMNIPOD 5 G7 INTRO KIT (GEN 5)	65
NUBEQA	16	OMNIPOD 5 G7 PODS (GEN 5)	65
NUCALA	71	OMNIPOD 5 LIBRE2 PLUS G6	65
NUDEXTA	41	OMNIPOD 5 LIBRE2 PLUS G6 PODS	65
NULOJIX	62	OMNIPOD CLASSIC PODS (GEN 3)	65
NUPLAZID	25	OMNIPOD DASH INTRO KIT (GEN 4)	65
NURTEC	14	OMNIPOD DASH PDM KIT (GEN 4)	65
NUTRILIPID	65	OMNIPOD DASH PODS (GEN 4)	66
NUVESSA	5	OMNITROPE	53
NUZYRA	8	ONCASPAR	18
<i>nyamyc</i>	13	<i>ondansetron hcl</i>	13
<i>nylia 1/35</i>	56	<i>ondansetron hydrochloride</i>	13
<i>nylia 7/7/7</i>	56	<i>ondansetron odt</i>	13
<i>nymyo</i>	56	ONGENTYS	24
<i>nystatin</i>	14	ONTRUZANT	23
<i>nystatin/triamcinolone</i>	44	ONUREG	18
<i>nystatin/triamcinolone acetonide</i>	44	OPDIVO	23
<i>nystop</i>	14	OPDUALAG	19
NYVEPRIA	33	OPSUMIT	70
OALIVA	49	OPVEE	4
<i>ocella</i>	56	<i>oralone dental paste</i>	42
OCTAGAM	60	ORAVIG	14
<i>octreotide acetate</i>	59	ORBACTIV	5
ODEFSEY	28	ORENCIA	61
ODOMZO	21	ORENCIA	62
OFEV	70	ORENCIA CLICKJECT	61
<i>ofloxacin</i>	7	ORENITRAM	70
<i>ofloxacin</i>	67	ORENITRAM TITRATION KIT MONTH	70
<i>ofloxacin</i>	68	1	
OGIVRI	23	ORENITRAM TITRATION KIT MONTH	70
OGSIVEO	18	2	
OJEMDA	18	ORENITRAM TITRATION KIT MONTH	70
OJJAARA	21	3	
OLANZAPINE	25	ORFADIN	50
<i>olanzapine odt</i>	25	ORGOVYX	59
<i>olanzapine/fluoxetine</i>	11	ORKAMBI	69
<i>olmesartan medoxomil</i>	34	ORLADEYO	59
<i>olmesartan medoxomil/hydrochlorothiazide</i>	38	ORSERDU	16
<i>olopatadine hydrochloride</i>	67	<i>oseltamivir phosphate</i>	29
<i>omega-3-acid ethyl esters</i>	39	OSENI	31
<i>omeprazole</i>	49	OSPHENA	58
<i>omeprazole dr</i>	49	OTEZLA	44
OMNIPOD 5 DEXG7G6 INTRO KIT	65	OTEZLA	61
(GEN 5)		<i>oxacillin sodium</i>	6

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<i>oxaprozin</i>	1	PENBRAYA	63
<i>oxazepam</i>	30	<i>penicillamine</i>	47
<i>oxcarbazepine</i>	10	<i>penicillin g potassium</i>	6
OXERVATE	66	<i>penicillin g potassium in iso-osmotic dextrose</i>	6
<i>oxybutynin chloride</i>	51	<i>penicillin v potassium</i>	6
<i>oxybutynin chloride er</i>	51	PENTACEL	63
<i>oxycodone hcl</i>	3	<i>pentamidine isethionate</i>	24
<i>oxycodone hydrochloride</i>	3	<i>pentobarbital sodium</i>	71
OXYCODONE HYDROCHLORIDE ER	2	<i>pentoxifylline er</i>	38
<i>oxycodone/acetaminophen</i>	3	<i>perindopril erbumine</i>	35
<i>oxymorphone hydrochloride</i>	3	<i>periogard</i>	42
<i>oxymorphone hydrochloride er</i>	2	PERJETA	23
<i>oxymorphone hydrochlorideer</i>	2	<i>permethrin</i>	44
OZEMPIC	31	<i>perphenazine</i>	25
<i>paclitaxel</i>	18	<i>perphenazine/amitriptyline</i>	11
PACLITAXEL PROTEIN-BOUND	18	PERSERIS	25
PARTICLES		<i>phenelzine sulfate</i>	11
PADCEV	23	<i>phenobarbital</i>	9
<i>paliperidone er</i>	25	<i>phenobarbital sodium</i>	9
<i>palonosetron hydrochloride</i>	13	<i>phenoxybenzamine hydrochloride</i>	34
<i>pamidronate disodium</i>	64	<i>phentolamine mesylate</i>	34
PANCREAZE	50	<i>phenylephrine hcl</i>	66
PANRETIN	23	<i>phenytek</i>	10
<i>pantoprazole sodium</i>	49	<i>phenytoin</i>	10
<i>paraplatin</i>	16	<i>phenytoin infatabs</i>	10
PARICALCITOL	64	<i>phenytoin sodium</i>	10
<i>paroxetine hcl</i>	11	<i>phenytoin sodium extended</i>	10
<i>paroxetine hcl er</i>	11	PHESGO	18
<i>paroxetine hydrochloride</i>	12	PHEXXI	52
<i>paroxetine hydrochloride er</i>	11	<i>philith</i>	56
PAXLOVID	29	PIFELTRO	28
<i>pazopanib hydrochloride</i>	21	<i>pilocarpine hcl</i>	68
PEDIARIX	63	<i>pilocarpine hydrochloride</i>	42
PEDVAX HIB	63	<i>pimecrolimus</i>	43
<i>peg-3350/electrolytes</i>	49	<i>pimozide</i>	25
<i>peg-3350/electrolytes/ascorbate</i>	49	<i>pimtrea</i>	56
<i>peg-3350/nacl/na bicarbonate/kcl</i>	49	<i>pindolol</i>	36
PEGASYS	61	<i>pioglitazone hcl</i>	31
PEGASYS	62	<i>pioglitazone hcl/metformin hcl</i>	31
PEMAZYRE	21	<i>pioglitazone hcl-glimepiride</i>	31
PEMETREXED	17	<i>pioglitazone hydrochloride</i>	31
PEMETREXED	18	<i>piperacillin sodium/tazobactam sodium</i>	7
<i>pemetrexed disodium</i>	17	PIQRAY 200MG DAILY DOSE	21
PEMFEXY	17		

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PIQRAY 250MG DAILY DOSE	21	PREMASOL	47
PIQRAY 300MG DAILY DOSE	21	PREMPRO	56
<i>pirfenidone</i>	70	<i>prenatal</i>	48
<i>piroxicam</i>	1	<i>prenatal 19</i>	48
PLEGRIDY	41	PRETOMANID	15
PLEGRIDY STARTER PACK	41	<i>prevalite</i>	39
PLENAMINE	46	PREVYMIS	27
PLERIXAFOR	33	PREZCOBIX	29
<i>podofilox</i>	44	PREZISTA	29
POLIVY	23	PRIFTIN	15
<i>polycin</i>	66	PRIMAQUINE PHOSPHATE	24
<i>polymyxin b sulfate</i>	5	<i>primidone</i>	9
<i>polymyxin b sulfate/trimethoprim sulfate</i>	66	PRIORIX	63
POMALYST	16	PRIVIGEN	60
<i>portia-28</i>	56	PROAIR DIGIHALER	69
PORTRAZZA	23	PROAIR RESPICLICK	69
<i>posaconazole</i>	14	<i>probenecid</i>	14
<i>posaconazole dr</i>	14	<i>probenecid/colchicine</i>	14
<i>potassium chloride</i>	47	<i>procainamide hcl</i>	35
<i>potassium chloride er</i>	46	<i>procainamide hydrochloride</i>	35
<i>potassium chloride/dextrose</i>	46	<i>prochlorperazine</i>	12
<i>potassium chloride/dextrose/lactated</i>	46	<i>prochlorperazine edisylate</i>	12
<i>ringers</i>		<i>prochlorperazine maleate</i>	12
<i>potassium chloride/dextrose/sodium</i>	46	PROCRIT	33
<i>chloride</i>		<i>procto-med hc</i>	64
<i>potassium chloride/sodium chloride</i>	46	<i>proctosol hc</i>	64
<i>potassium citrate er</i>	47	<i>proctozone-hc</i>	64
PRALATREXATE	17	PROCYSBI	50
PRALUENT	39	<i>progesterone</i>	58
<i>pramipexole dihydrochloride</i>	24	PROGRAF	62
<i>prasugrel hydrochloride</i>	34	PROLASTIN-C	50
<i>pravastatin sodium</i>	39	PROLEUKIN	18
<i>praziquantel</i>	23	PROLIA	64
<i>prazosin hydrochloride</i>	34	PROMACTA	33
<i>prednisolone</i>	52	<i>promethazine hcl</i>	12
<i>prednisolone acetate</i>	67	<i>promethazine hydrochloride</i>	12
<i>prednisolone sodium phosphate</i>	52	<i>promethegan</i>	12
<i>prednisolone sodium phosphate</i>	67	<i>propafenone hcl</i>	35
<i>prednisolone sodium phosphate odt</i>	52	<i>propafenone hydrochloride</i>	35
<i>prednisone</i>	52	<i>propafenone hydrochloride er</i>	35
<i>pregabalin</i>	9	<i>proparacaine hcl</i>	66
PREGNYL	53	<i>propranolol hcl</i>	36
<i>pregnyl w/diluent benzyl alcohol/nacl</i>	53	<i>propranolol hcl er</i>	36
PREHEVBRIO	63	<i>propranolol hydrochloride</i>	36
PREMARIN	56	<i>propranolol hydrochloride er</i>	36

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PROQUAD	63	REMODULIN	70
PROSOL	47	RENACIDIN	52
PROTOPAM CHLORIDE	66	RENFLEXIS	62
<i>protriptyline hcl</i>	12	<i>repaglinide</i>	31
PULMOZYME	69	REPATHA	39
PURIXAN	17	REPATHA PUSHTRONEX SYSTEM	39
<i>pyrazinamide</i>	15	REPATHA SURECLICK	39
<i>pyridostigmine bromide</i>	15	RESTASIS	66
<i>pyridostigmine bromide er</i>	15	RESTASIS MULTIDOSE	66
<i>pyrimethamine</i>	24	RETACRIT	33
QINLOCK	21	RETEVMO	21
QUADRACEL	63	RETROVIR IV INFUSION	28
<i>quetiapine fumarate</i>	11	REXULTI	25
<i>quetiapine fumarate</i>	25	REYATAZ	29
<i>quetiapine fumarate er</i>	25	REYVOW	14
<i>quinapril hydrochloride</i>	35	REZLIDHIA	21
QUINAPRIL/HYDROCHLOROTHIAZID	38	REZUROCK	62
E		RHOGAM ULTRA-FILTERED PLUS	60
<i>quinidine gluconate cr</i>	35	RHOPHYLAC	60
<i>quinidine gluconate er</i>	35	RHOPRESSA	68
<i>quinidine sulfate</i>	35	RIABNI	23
<i>quinine sulfate</i>	24	<i>ribavirin</i>	27
QVAR REDIHALER	68	<i>ribavirin</i>	71
RABAVERT	63	RIDAURA	61
<i>rabeprazole sodium</i>	49	<i>rifabutin</i>	15
RAGWITEK	61	<i>rifampin</i>	15
<i>raloxifene hydrochloride</i>	58	<i>riluzole</i>	41
<i>ramelteon</i>	71	<i>rimantadine hydrochloride</i>	29
<i>ramipril</i>	35	RIMSO-50	52
<i>ranolazine er</i>	38	<i>ringers injection</i>	47
<i>rasagiline mesylate</i>	24	<i>ringers irrigation</i>	66
RAVICTI	50	RINVOQ	61
REBIF	41	<i>risedronate sodium</i>	64
REBIF REBIDOSE	41	<i>risedronate sodium dr</i>	64
REBIF REBIDOSE TITRATION PACK	41	RISPERDAL CONSTA	26
REBIF TITRATION PACK	41	<i>risperidone</i>	26
REBLOZYL	33	<i>risperidone er</i>	26
<i>reclipsen</i>	56	<i>risperidone odt</i>	26
RECOMBIVAX HB	63	<i>ritonavir</i>	29
RECTIV	49	RITUXAN	23
REGONOL	15	RITUXAN HYCELA	23
REGRANEX	44	<i>rivastigmine tartrate</i>	10
RELENZA DISKHALER	29	<i>rivastigmine transdermal system</i>	10
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<i>rizatriptan benzoate odt</i>	14	SHINGRIX	63
ROCKLATAN	66	SIGNIFOR	59
<i>roflumilast</i>	69	SIGNIFOR LAR	59
ROMIDEPSIN	18	<i>sildenafil</i>	70
<i>ropinirole er</i>	24	SILDENAFIL CITRATE	70
<i>ropinirole hcl</i>	24	<i>silodosin</i>	51
<i>ropinirole hydrochloride</i>	24	<i>silver sulfadiazine</i>	44
<i>rosuvastatin calcium</i>	39	SIMBRINZA	66
ROTARIX	63	<i>simliya</i>	56
ROTATEQ	63	<i>simpesse</i>	56
<i>roweepira</i>	9	SIMULECT	61
ROZLYTREK	21	<i>simvastatin</i>	39
RUBRACA	21	<i>sirolimus</i>	62
RUCONEST	59	SIRTURO	15
<i>rufinamide</i>	10	SIVEXTRO	5
RUKOBIA	28	SKYRIZI	61
RUXIENCE	23	SKYRIZI PEN	61
RYBELSUS	31	SLYND	58
RYBREVANT	23	<i>sodium chloride</i>	47
RYDAPT	21	<i>sodium chloride 0.45%</i>	47
RYLAZE	18	<i>sodium chloride 0.9%</i>	66
RYTARY	24	<i>sodium fluoride</i>	47
<i>sajazir</i>	59	SODIUM OXYBATE	71
<i>salsalate</i>	1	<i>sodium phenylacetate/sodium benzoate</i>	66
SANCUSO	13	<i>sodium phenylbutyrate</i>	50
SANDOSTATIN LAR DEPOT	59	<i>sodium polystyrene sulfonate</i>	48
SANTYL	44	<i>sodium sulfacetamide</i>	7
<i>sapropterin dihydrochloride</i>	50	SODIUM SULFATE/POTASSIUM	49
SARCLISA	23	SULFATE/MAGNESIUM SULFATE	
SAVELLA	41	SOFOSBUVIR/VELPATASVIR	27
SAVELLA TITRATION PACK	41	<i>solifenacin succinate</i>	51
SCEMBLIX	21	SOLIRIS	61
<i>scopolamine</i>	13	SOLTAMOX	16
SECUADO	26	SOMATULINE DEPOT	59
<i>selegiline hcl</i>	24	SOMAVERT	59
<i>selenium sulfide</i>	43	<i>sorafenib</i>	21
SELZENTRY	28	<i>sorafenib tosylate</i>	21
SEREVENT DISKUS	69	<i>sorine</i>	35
SEROSTIM	53	<i>sotalol hcl</i>	35
<i>sertraline hcl</i>	12	<i>sotalol hcl (af)</i>	35
<i>sertraline hydrochloride</i>	12	<i>sotalol hcl af</i>	35
<i>setlakin</i>	56	<i>sotalol hydrochloride</i>	35
<i>sevelamer carbonate</i>	48	<i>sotalol hydrochloride (af)</i>	35
<i>sevelamer hydrochloride</i>	48	SOTYLIZE	35

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SPIRIVA RESPIMAT	69	SYLVANT	61
<i>spironolactone</i>	39	SYMDEKO	69
<i>spironolactone/hydrochlorothiazide</i>	38	SYMLINPEN 120	31
SPRAVATO 56MG DOSE	11	SYMLINPEN 60	31
SPRAVATO 84MG DOSE	11	SYMPAZAN	9
<i>sprintec 28</i>	56	SYMPROIC	48
SPRITAM	9	SYMTUZA	29
SPRYCEL	21	SYNAGIS	60
<i>sps</i>	48	SYNAREL	59
<i>sronyx</i>	56	SYNJARDY	31
<i>ssd</i>	44	SYNJARDY XR	31
STAMARIL	63	SYNTHROID	58
STELARA	61	TABLOID	17
<i>sterile water for irrigation</i>	66	TABRECTA	21
STIMUFEND	34	<i>tacrolimus</i>	43
STIOLTO RESPIMAT	71	<i>tacrolimus</i>	62
STIVARGA	21	<i>tadalafil</i>	51
STRENSIQ	50	<i>tadalafil</i>	70
STREPTOMYCIN SULFATE	4	TAFINLAR	21
STRIBILD	27	<i>tafluprost</i>	68
<i>subvenite</i>	9	TAGRISSE	21
<i>subvenite starter kit/blue</i>	9	TAKHZYRO	59
<i>subvenite starter kit/green</i>	9	TALTZ	61
<i>subvenite starter kit/orange</i>	9	TALVEY	19
SUCRAID	51	TALZENNA	21
<i>sucrafate</i>	49	<i>tamoxifen citrate</i>	16
<i>sulfacetamide sodium</i>	7	<i>tamsulosin hydrochloride</i>	51
<i>sulfacetamide sodium</i>	67	<i>tarina 24 fe</i>	56
<i>sulfacetamide sodium/prednisolone sodium</i>	66	<i>tarina fe 1/20 eq</i>	56
<i>phosphate</i>		TASIGNA	21
<i>sulfadiazine</i>	7	<i>tasimelteon</i>	71
<i>sulfamethoxazole/trimethoprim</i>	7	TAVNEOS	61
<i>sulfamethoxazole/trimethoprim ds</i>	8	<i>taysofy</i>	56
SULFAMYLON	44	<i>tazarotene</i>	42
<i>sulfasalazine</i>	64	<i>tazicef</i>	6
<i>sulindac</i>	1	<i>taztia xt</i>	37
<i>sumatriptan</i>	14	TAZVERIK	21
<i>sumatriptan succinate</i>	14	TDVAX	63
SUMATRIPTAN SUCCINATE REFILL	14	TECENTRIQ	23
<i>sunitinib malate</i>	21	TECENTRIQ HYBREZA	23
SUNLENCA	28	TECVAYLI	19
SUNOSI	71	TEFLARO	6
SURE COMFORT INSULIN SYRINGE/U- 100/0.5ML/29G X 1/2"	66	<i>telmisartan</i>	34
		<i>telmisartan/hydrochlorothiazide</i>	38

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Drug Name	Page #	Drug Name	Page #
<i>temazepam</i>	71	TIVDAK	23
TEMODAR	16	TIVICAY	27
<i>temsirolimus</i>	21	TIVICAY PD	27
TENIVAC	63	<i>tizanidine hcl</i>	26
<i>tenofovir disoproxil fumarate</i>	28	<i>tizanidine hydrochloride</i>	26
TEPMETKO	21	TOBI PODHALER	69
<i>terazosin hcl</i>	51	<i>tobramycin</i>	67
<i>terazosin hydrochloride</i>	51	<i>tobramycin</i>	69
<i>terbinafine hcl</i>	14	<i>tobramycin sulfate</i>	4
<i>terbutaline sulfate</i>	69	<i>tobramycin/dexamethasone</i>	66
<i>terconazole</i>	14	TODAYS HEALTH ORIGINAL PEN	66
<i>teriflunomide</i>	41	NEEDLES 29G X 1/2"	
TERIPARATIDE	65	<i>tolcapone</i>	24
<i>testosterone</i>	53	<i>tolterodine tartrate</i>	51
<i>testosterone cypionate</i>	53	<i>tolterodine tartrate er</i>	51
<i>testosterone enanthate</i>	53	TOLVAPTAN	47
<i>testosterone pump</i>	53	<i>topiramate</i>	9
<i>tetrabenazine</i>	41	<i>topiramate er</i>	9
<i>tetracycline hydrochloride</i>	8	<i>topotecan hcl</i>	19
TEVIMBRA	23	<i>topotecan hydrochloride</i>	19
TEZSPIRE	71	<i>toremifene citrate</i>	16
THALOMID	16	TORISEL	21
<i>theophylline</i>	70	<i>torpenz</i>	21
<i>theophylline er</i>	70	<i>torseamide</i>	38
THIOLA EC	52	TOUJEO MAX SOLOSTAR	32
<i>thioridazine hcl</i>	25	TOUJEO SOLOSTAR	32
<i>thiotepa</i>	16	TRADJENTA	31
<i>thiothixene</i>	25	<i>tramadol hcl er</i>	2
THYMOGLOBULIN	60	<i>tramadol hydrochloride</i>	3
THYROID	58	<i>tramadol hydrochloride er</i>	2
<i>tiadylt er</i>	37	<i>tramadol hydrochloride/acetaminophen</i>	3
<i>tiagabine hydrochloride</i>	9	<i>trandolapril</i>	35
TIBSOVO	21	<i>trandolapril/verapamil hcl er</i>	38
TICE BCG	19	<i>tranexamic acid</i>	34
TICOVAC	63	<i>tranylcypromine sulfate</i>	11
<i>tigecycline</i>	5	TRAVASOL	47
<i>tilia fe</i>	56	<i>travoprost</i>	68
<i>timolol maleate</i>	14	TRAZIMERA	23
<i>timolol maleate</i>	67	<i>trazodone hydrochloride</i>	12
<i>timolol maleate ophthalmic gel forming</i>	67	TREANDA	16
<i>tinidazole</i>	5	TRECTOR	15
<i>tiopronin</i>	52	TRELEGY ELLIPTA	71
<i>tiopronin dr</i>	52	TRELSTAR MIXJECT	59
<i>tiotropium bromide</i>	69	<i>treprostinil</i>	70
<i>tis-u-sol</i>	66	TRESIBA	32

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TRESIBA FLEXTOUCH	32	TUKYSA	21
<i>tretinoin</i>	23	TURALIO	21
<i>tretinoin</i>	42	<i>turqoz</i>	57
<i>triamcinolone acetonide</i>	43	TWINRIX	63
<i>triamcinolone acetonide dental paste</i>	42	TWIRLA	57
<i>triamterene</i>	38	TYBLUME	57
<i>triamterene/hydrochlorothiazide</i>	38	TYBOST	28
<i>triazolam</i>	71	<i>tydemy</i>	57
<i>triderm</i>	43	TYENNE	61
<i>trientine hydrochloride</i>	47	TYPHIM VI	64
<i>tri-estarylla</i>	56	TYSABRI	41
<i>trifluoperazine hcl</i>	25	TYVASO	70
<i>trifluoperazine hydrochloride</i>	25	TYVASO DPI INSTITUTIONAL KIT	70
<i>trifluridine</i>	67	TYVASO DPI MAINTENANCE KIT	70
<i>trihexyphenidyl hydrochloride</i>	24	TYVASO DPI TITRATION KIT	70
TRIJARDY XR	31	TYVASO REFILL KIT	70
TRIKAFTA	69	TYVASO STARTER KIT	70
<i>tri-legest fe</i>	56	UDENYCA	34
<i>tri-linyah</i>	56	UDENYCA ONBODY	34
<i>tri-lo-estarylla</i>	56	ULTOMIRIS	61
<i>tri-lo-marzia</i>	56	<i>unithroid</i>	58
<i>tri-lo-mili</i>	56	UPTRAVI	70
<i>tri-lo-sprintec</i>	56	UPTRAVI TITRATION PACK	70
<i>trimethoprim</i>	5	<i>ursodiol</i>	49
<i>tri-mili</i>	56	VABYSMO	66
<i>trimipramine maleate</i>	12	<i>valacyclovir hydrochloride</i>	29
TRINTELLIX	12	VALCHLOR	16
<i>tri-nymyo</i>	57	<i>valganciclovir</i>	27
TRISENOX	19	<i>valganciclovir hydrochloride</i>	27
<i>tri-sprintec</i>	57	<i>valproate sodium</i>	9
TRIUMEQ	28	<i>valproic acid</i>	9
TRIUMEQ PD	28	<i>valrubicin</i>	19
<i>trivora-28</i>	57	<i>valsartan</i>	34
<i>tri-vylibra</i>	57	<i>valsartan/hydrochlorothiazide</i>	38
<i>tri-vylibra lo</i>	57	VALSTAR	19
TRIZIVIR	28	VALTOCO 10 MG DOSE	9
TRODELVY	23	VALTOCO 15 MG DOSE	9
TROGARZO	28	VALTOCO 20 MG DOSE	9
TROPHAMINE	47	VALTOCO 5 MG DOSE	9
<i>tropium chloride</i>	51	<i>vancomycin</i>	5
TRULICITY	31	<i>vancomycin hcl</i>	5
TRUMENBA	63	<i>vancomycin hydrochloride</i>	5
TRUQAP	21	<i>vancomycin hydrochloride/dextrose</i>	5
TRUXIMA	23	VANFLYTA	21
TUDORZA PRESSAIR	69	VAQTA	64

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Drug Name	Page #	Drug Name	Page #
<i>varenicline starting month box</i>	4	<i>viorele</i>	57
<i>varenicline tartrate</i>	4	VIRACEPT	29
VARIVAX	64	VIREAD	28
VARIZIG	60	VISTOGARD	66
<i>vasopressin</i>	53	VITRAKVI	21
<i>vasopressin + rfid</i>	53	VIVITROL	3
<i>vasostrict</i>	53	VIZIMPRO	22
VAXELIS	64	VOCABRIA	27
VECTIBIX	23	<i>volnea</i>	57
VEGZELMA	23	VONJO	19
VEKLURY	29	VORANIGO	23
VELCADE	19	<i>voriconazole</i>	14
VELIVET	57	VOWST	49
VELTASSA	48	VPRIV	51
VEMLIDY	27	VRAYLAR	26
VENCLEXTA	21	VUMERITY	41
VENCLEXTA STARTING PACK	21	VYEPTI	14
VENLAFAXINE BESYLATE ER	12	<i>vyfemla</i>	57
<i>venlafaxine hydrochloride</i>	12	<i>vylibra</i>	57
<i>venlafaxine hydrochloride er</i>	12	VYNDAMAX	38
VENTAVIS	70	VYNDAQEL	51
<i>ventolin hfa</i>	69	VYXEOS	17
VEOZAH	41	VYZULTA	68
<i>verapamil hcl</i>	37	<i>warfarin sodium</i>	33
<i>verapamil hcl er</i>	37	WELIREG	51
<i>verapamil hcl sr</i>	37	<i>wera</i>	57
<i>verapamil hydrochloride</i>	37	WINRHO SDF	60
<i>verapamil hydrochloride er</i>	37	<i>wixela inhub</i>	71
VERQUVO	39	<i>wymzya fe</i>	57
VERSACLOZ	26	XALKORI	22
VERZENIO	21	XARELTO	33
<i>vestura</i>	57	XARELTO STARTER PACK	33
VIBERZI	48	XATMEP	62
VIBRAMYCIN	8	XCOPRI	10
<i>vienna</i>	57	XDEMVY	67
<i>vigabatrin</i>	9	XELJANZ	61
<i>vigadrone</i>	9	XELJANZ XR	61
VIGAFYDE	9	XEMBIFY	60
<i>vigpoder</i>	9	XEOMIN	26
<i>vilazodone hydrochloride</i>	12	XERAVA	8
VIMIZIM	51	XERMELO	48
VIMPAT	10	XGEVA	65
<i>vinblastine sulfate</i>	19	XIAFLEX	51
<i>vincristine sulfate</i>	19	XIFAXAN	49
<i>vinorelbine tartrate</i>	19	XIGDUO XR	31

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XIIDRA	67	ZTALMY	10
XOFLUZA	29	<i>zumandimine</i>	57
XOLAIR	61	ZURZUVAE	11
XOSPATA	22	ZYDELIG	22
XPOVIO	22	ZYKADIA	22
XPOVIO 60 MG TWICE WEEKLY	22	ZYNLONTA	23
XPOVIO 80 MG TWICE WEEKLY	22	ZYNYZ	23
XTANDI	16	ZYPREXA RELPREVV	26
<i>xulane</i>	57		
XULTOPHY 100/3.6	31		
XURIDEN	51		
<i>yargesa</i>	51		
YERVOY	23		
YF-VAX	64		
YONDELIS	16		
YONSA	16		
YUVAFEM	57		
<i>zafemy</i>	57		
<i>zafirlukast</i>	69		
ZALTRAP	19		
ZANOSAR	16		
ZEJULA	22		
ZELBORAF	22		
ZEMAIRA	51		
ZEMDRI	4		
<i>zenatane</i>	42		
ZENPEP	51		
ZEPATIER	27		
ZEPOSIA	41		
ZEPOSIA 7-DAY STARTER PACK	41		
ZEPOSIA STARTER KIT	41		
ZEPZELCA	16		
<i>zidovudine</i>	28		
ZIEXTENZO	34		
<i>ziprasidone hcl</i>	26		
<i>ziprasidone mesylate</i>	26		
ZIRGAN	67		
ZOLADEX	59		
<i>zoledronic acid</i>	65		
ZOLINZA	19		
<i>zolmitriptan</i>	14		
<i>zolpidem tartrate</i>	71		
ZONISADE	10		
<i>zonisamide</i>	10		
<i>zovia 1/35</i>	57		

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Multi-Language Insert

Multi-Language Interpreter Services

English: We have free interpreter services to answer any questions you may have about our health or drug plan. To get an interpreter, just call us at (877) 210-9167 (TTY: 711). Someone who speaks English/Language can help you. This is a free service.

Spanish: Tenemos servicios de intérprete sin costo alguno para responder cualquier pregunta que pueda tener sobre nuestro plan de salud o medicamentos. Para hablar con un intérprete, por favor llame al (877) 210-9167 (TTY: 711). Alguien que hable español le podrá ayudar. Este es un servicio gratuito.

Chinese Mandarin: 我们提供免费的翻译服务，帮助您解答关于健康或药物保险的任何疑问。如果您需要此翻译服务，请致电 (877) 210-9167 (TTY: 711)。我们的中文工作人员很乐意帮助您。这是一项免费服务。

Chinese Cantonese: 您對我們的健康或藥物保險可能存有疑問，為此我們提供免費的翻譯服務。如需翻譯服務，請致電 (877) 210-9167 (TTY: 711)。我們講中文的人員將樂意為您提供幫助。這是一項免費服務。

Tagalog: Mayroon kaming libreng serbisyo sa pagsasaling-wika upang masagot ang anumang mga katanungan ninyo hinggil sa aming planong pangkalusugan o panggamot. Upang makakuha ng tagasaling-wika, tawagan lamang kami sa (877) 210-9167 (TTY: 711). Maaari kayong tulungan ng isang nakakapagsalita ng Tagalog. Ito ay libreng serbisyo.

French: Nous proposons des services gratuits d'interprétation pour répondre à toutes vos questions relatives à notre régime de santé ou d'assurance-médicaments. Pour accéder au service d'interprétation, il vous suffit de nous appeler au (877) 210-9167 (TTY: 711). Un interlocuteur parlant Français pourra vous aider. Ce service est gratuit.

Vietnamese: Chúng tôi có dịch vụ thông dịch miễn phí để trả lời các câu hỏi về chương sức khỏe và chương trình thuốc men. Nếu quý vị cần thông dịch viên xin gọi (877) 210-9167 (TTY: 711) sẽ có nhân viên nói tiếng Việt giúp đỡ quý vị. Đây là dịch vụ miễn phí.

German: Unser kostenloser Dolmetscherservice beantwortet Ihren Fragen zu unserem Gesundheits- und Arzneimittelplan. Unsere Dolmetscher

erreichen Sie unter (877) 210-9167 (TTY: 711). Man wird Ihnen dort auf Deutsch weiterhelfen. Dieser Service ist kostenlos.

Korean: 당사는 의료 보험 또는 약품 보험에 관한 질문에 대해 드리고자 무료 통역 서비스를 제공하고 있습니다. 통역 서비스를 이용하려면 전화 (877) 210-9167 (TTY: 711)번으로 문의해 주십시오. 한국어를 하는 담당자가 도와 드릴 것입니다. 이 서비스는 무료로 운영됩니다.

Russian: Если у вас возникнут вопросы относительно страхового или медикаментного плана, вы можете воспользоваться нашими бесплатными услугами переводчиков. Чтобы воспользоваться услугами переводчика, позвоните нам по телефону (877) 210-9167 (TTY: 711). Вам окажет помощь сотрудник, который говорит по-русски. Данная услуга бесплатная.

Arabic: إننا نقدم خدمات المترجم الفوري المجانية للإجابة عن أي أسئلة تتعلق بالصحة أو جدول الأدوية لدينا. للحصول على مترجم فوري، ليس عليك سوى الاتصال بنا على (877-210-9167) TTY: 711. سيقوم شخص ما يتحدث العربية بمساعدتك. هذه خدمة مجانية.

Hindi: हमारे स्वास्थ्य या दवा की योजना के बारे में आपके किसी भी प्रश्न के जवाब देने के लिए हमारे पास मुफ्त दुभाषिया सेवाएँ उपलब्ध हैं. एक दुभाषिया प्राप्त करने के लिए, बस हमें (877) 210-9167 (TTY: 711) पर फोन करें. कोई व्यक्ति जो हिन्दी बोलता है आपकी मदद कर सकता है. यह एक मुफ्त सेवा है.

Italian: È disponibile un servizio di interpretariato gratuito per rispondere a eventuali domande sul nostro piano sanitario e farmaceutico. Per un interprete, contattare il numero (877) 210-9167 (TTY: 711). Un nostro incaricato che parla Italianovi fornirà l'assistenza necessaria. È un servizio gratuito.

Portugués: Dispomos de serviços de interpretação gratuitos para responder a qualquer questão que tenha acerca do nosso plano de saúde ou de medicação. Para obter um intérprete, contacte-nos através do número (877) 210-9167 (TTY: 711). Irá encontrar alguém que fale o idioma Português para o ajudar. Este serviço é gratuito.

French Creole: Nou genyen sèvis entèprèt gratis pou reponn tout kesyon ou ta genyen konsènan plan medikal oswa dwòg nou an. Pou jwenn yon entèprèt, jis rele nou nan (877) 210-9167 (TTY: 711). Yon moun ki pale Kreyòl kapab ede w. Sa a se yon sèvis ki gratis.

Polish: Umożliwiamy bezpłatne skorzystanie z usług tłumacza ustnego, który pomoże w uzyskaniu odpowiedzi na temat planu zdrowotnego lub

dawkowania leków. Aby skorzystać z pomocy tłumacza znającego język polski, należy zadzwonić pod numer (877) 210-9167 (TTY: 711). Ta usługa jest bezpłatna.

Japanese: 当社の健康 健康保険と薬品 処方薬プランに関するご質問にお答えするために、無料の通訳サービスがあります。通訳をご用命になるには、(877) 210-9167 (TTY: 711)にお電話ください。日本語を話す人者が支援いたします。これは無料のサービスです。

Form CMS-10802
(Expires 12/31/25)

Discrimination is Against the Law

FirstCarolinaCare Insurance Company complies with applicable Federal Civil Rights laws and does not discriminate on the basis of race, color, national origin, age, disability or sex (including discrimination on the basis of sex characteristics, including intersex traits; pregnancy or related conditions; sexual orientation; gender identity; and sex stereotypes).

FirstCarolinaCare Insurance Company does not exclude people or treat them differently because of race, color, national origin, age, disability or sex (including discrimination on the basis of sex characteristics, including intersex traits; pregnancy or related conditions; sexual orientation; gender identity; and sex stereotypes).

FirstCarolinaCare Insurance Company provides free aids and services to people with disabilities to communicate effectively with us, such as:

Qualified sign language interpreters.

Written information in other formats (large print, audio, accessible electronic formats, other formats).

Provides free language services to people whose primary language is not English, such as:

Qualified interpreters.

Information written in other languages.

If you need these services, contact Customer Service. If you believe that FirstCarolinaCare Insurance Company has failed to provide these services or discriminated in another way on the basis of race, color, national origin, age, disability or sex (including discrimination on the basis of sex characteristics, including intersex traits; pregnancy or related conditions; sexual orientation; gender identity; and sex stereotypes), you can file a grievance with: FirstCarolinaCare Insurance Company, Customer Service, 3310 Fields South Drive, Champaign, Illinois 61822, telephone: (800) 481-1092, fax: (217) 902-9705, CustomerService@FirstCarolinaCare.com.

You can file a grievance in person or by mail, fax or email. If you need help filing a grievance, Customer Service is available to help you.

You can also file a Civil Rights complaint with the U.S. Department of Health and Human Services, Office for Civil Rights electronically through the Office for Civil Rights Complaint Portal, available at <https://ocrportal.hhs.gov/ocr/portal/lobby.jsf>, or by mail or phone at:

U.S. Department of
Health and Human
Services, 200
Independence Avenue
SW., Room 509F, HHS
Building, Washington,
DC 20201, (800) 368-
1019, (800) 537-7697
(TDD). Complaint forms

are available at

<http://www.hhs.gov/ocr/office/file/index.html>.FCC

Approved 07/2023

GNCMFC24-nondiscrimnt-0723

GNCMFC25-nondiscrimnt-0524 Y0094_25_118778_C

This formulary was updated on 10/1/24. For more recent information or other questions, please contact FirstCarolinaCare Member Services, at (855) 291-9336 (TTY users should call 711), 8 a.m. to 8 p.m., local time, 7 days a week. From April 1 – September 30 voicemail will be used on weekends and holidays, or visit [FirstCarolinaCare.com/NHHA](https://www.FirstCarolinaCare.com/NHHA).



**(855) 291-9336, TTY/TDD 711
[FirstCarolinaCare.com/NHHA](https://www.FirstCarolinaCare.com/NHHA)**